

State Coordinated
Regional Shelter Plan
Annex A

Congregate Shelters

Draft: July 2020

Annex A – Congregate Shelters

Record of Changes

Date of Change	Location of Change	Description of Change

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Basic Plan

1. Background

State Coordinated Regional Shelters are designed to provide immediate temporary shelter for persons described below who are displaced by an emergency event. Congregate State Coordinated Regional Shelters (hereinafter “Congregate SCRS” or “Congregate SCR Shelter(s)”) will be located primarily in state owned properties and staffed by VDSS, the Adjunct Emergency Workforce, the Site, or other state agencies as directed by the Governor.

All congregate Sites were pre-identified in the 2006 Potential Shelter Survey, and assessed by a multi-disciplinary state shelter site assessment team (hereinafter “the Team”). The Team has concluded that these sites have the capability to shelter evacuees, including those with certain special medical needs, accompanying service animals, and, at certain sites, companion animals. It has been determined the facilities are ADA compliant based on regulations at the time of construction and have other features adequate for sheltering of evacuees.

The *Commonwealth of Virginia State Coordinated Regional Shelter Plan* identified and defines the all basic planning considerations for SCRS. This annex is supplemental to the SCRS Plan and defines any additional or adjusted considerations specific to Congregate SCRS.

2. Protocol

2.1 Accommodations

Functional Needs Support Services will be provided as needed and in accordance with the Americans with Disabilities Act (ADA). These services will include reasonable modifications to policies, practices, and procedures; provision of durable medical equipment (DME); provision of consumable medical supplies (CMS); provision of personal assistance services (PAS); provision of interpreters and translated documents; provision of assistive technology; and other services and equipment as necessary.

- 2.1.1 All Congregate SCR Shelters will be fully accessible, with or without temporary modifications.
- 2.1.2 Individuals will not be segregated based solely on a disability, access, or functional need. Emergency programs, services, and activities will be provided in an integrated setting; however, each individual has the right to self-determination. If the individual meets the criteria established for the medical area/shelter and feels safer or more comfortable in a medical area/shelter, then the individual may be permitted to reside there if space is available as determined by the shelter manager. Individuals with acute medical needs will be transferred to a medical facility for treatment.
- 2.1.3 Individuals and groups will be placed, as best as possible, within the shelter such that their needs can be most easily met.
- 2.1.4 Many people with disabilities and/or access and functional needs who use attendant care are not medically fragile and do not require the level of care provided in the

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medical needs area. These individuals should generally be housed with their families in the general population area of the shelter unless a medical reason exists to reside in the medical needs area as determined by the medical assessment team.

2.2 Pharmaceuticals, supplies, and devices

- 2.2.1 Evacuees for whom medications and supplies have been prescribed are encouraged through public messaging to bring those pharmaceuticals, supplies, and devices necessary for health maintenance with them to the shelter. These items will remain under the ownership and cognizance of the individual(s) to whom they belong. If necessary, assistance in administering medications or operating medical equipment may be requested through on-site health representatives as coordinated by the VDH.
 - 2.2.1.1 On-site healthcare providers may not have the expertise to administer certain medications (i.e. products that need to be infused over a period of time such as certain immune modulators, etc.). In this instance, the individual may need to be referred to an outside provider able to meet the patient’s need. If the need is urgent, the client will be transported via the EMS system to a tertiary level facility for treatment.
- 2.2.2 Each Site will have a small inventory of durable medical equipment (DME) that is delivered with original supply shipment. If the appropriate DME is not available on-site, the SCR Shelter staff will ensure that a request is made to have it delivered as soon as possible.
- 2.2.3 Medication Assisted Treatment (MAT): It is critical for evacuees in Medication Assisted Treatment programs currently receiving Suboxone, Methadone and/or Subutex to take their prescribed medication dose at the same time each day per their standard schedule. If the operation of a local Opioid Treatment Program (OTP) is threatened by impending inclement weather or other natural or man-made disaster, the State Opioid Treatment Authority (SOTA) may authorize dispensing of a multi-day supply of these medications to individuals in the program. Should these individuals subsequently present at a SCR Shelter, their medication must be handled appropriately such that it is secure and available for their use. The SOTA has provided the following guidance for shelter staff to ensure MAT medications are handled appropriately:

METHADONE

1. The medication should be in a locked box. The individual seeking shelter should provide this locked box to shelter staff to be stored in a secure location with other pharmaceuticals. Make sure the patient’s name is clearly marked on the box.
2. The medication is dispensed in liquid form for daily dosing. The bottle will be labeled with the program’s name, the patient’s name, the dosage, the date similarly to any prescription filled at any pharmacy. The patient will mix water into the bottle and drink the medication.
3. Each day the patient MUST show their identification in order to receive that day’s dose. The empty bottle should be placed back into the locked box.

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4. All OTPs are instructed to give each patient a letter from the program physician to be placed with the medication stating the individual is a patient at an identified clinic.

SUBOXONE/SUBUTEX

1. The medication should be in a locked box and should be handled similar to methadone as noted above.
2. The medication might be in pill form or film strips.
3. Each day the patient **MUST** show their identification in order to receive that day's dose. The empty bottle should be placed back into the locked box.
4. All OTPs are instructed to give each patient a letter from the program physician to be placed with the medication stating the individual is a patient at an identified clinic.

2.3 Safety

- 2.3.1 A Disclosure Statement and Shelter Protocols (see Appendix 7) will be provided to staff and evacuees entering the SCR Shelter(s).
- 2.3.2 No Site will be opened until security and a registration system is fully in place and ready to accept residents.
- 2.3.3 Evacuees, their belongings, companion and service animals will be registered and identified.
- 2.3.4 All shelter residents, staff, contractors and volunteers will receive ID bands that must be worn at all times while in the shelter. Any individual without an ID band will be brought to the attention of shelter security.
- 2.3.5 Any person that is not a shelter resident, staff, or volunteer is considered a visitor and will be processed as stated in the Visitor Processing Procedures (see Appendix 9).
- 2.3.6 Consistent with applicable law, all persons admitted to SCR Shelters will be informed that as a condition of admittance they may be subject to search.

2.4 Registered Sex Offenders

- 2.4.1 Any individual listed in the Virginia Sex Offender and Crimes Against Minors Registry, as defined by the Virginia Code, Chapter 9, who enters a SCR Shelters will be required, as prescribed in the Disclosure Statement and Shelter Protocols, to notify the shelter management of his/her registry status.
- 2.4.2 To the extent possible, VDSS will access the Virginia Sex Offender and Crimes Against Minors Registry and the National Registry for Sex Offenders to determine if an evacuee's name is a match in either Registry.
- 2.4.3 Registered offenders will not be segregated from the population. Security staff will discretely be made aware of any offenders within the shelter population and heightened observation will be maintained.

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2.5 Weapons

- 2.5.1 Pursuant to the authority in § 44.146.15 of the *Code of Virginia*, and in order to ensure public safety, all weapons listed in § 18.2-308 A of the *Code of Virginia*, including all firearms, are prohibited from such shelters. This prohibition applies to both open and concealed carry of firearms pursuant to a concealed carry permit. The firearm restriction shall not apply to members of the National Guard and Law Enforcement Officers in the performance of their official duties.
- 2.5.2 Weapons will be prohibited in SCR shelters within the bounds of local, state, and federal law. Weapons policies of the Institutes of Higher Education (IHE) will be enforced. SCR shelters will not store or supervise weapons brought to the shelter by evacuees.

2.6 Communications

- 2.6.1 Where practical, maximum use will be made of fixed communications and information systems (WAN/LAN) already in place within the facility or under the host institution's control; and the host's information security and IT support staff will make accommodations to support shelter operations.
- 2.6.2 Equipment and system requirements beyond the capability of Site will be identified pre-event during planning meetings and/or exercise events between the SCR Shelter Stakeholders and the Site. Pre-scripted Resource Requests (PSRR) requesting the required communications capabilities will be developed and/or coordinated by VDSS through recommendations made by VITA.
- 2.6.3 To the extent possible, SCR Shelters will make available modes of communication for arriving displaced persons to locate families and/or report missing persons.
- 2.6.4 SCR Shelter residents will have restricted access to data services via the internet. Measures will be taken to limit access to specific pre-identified sites.
- 2.6.5 SCR Shelters residents will have access to telephone communications, as available.
- 2.6.6 Self-service charging stations will be available for portable telephones and electronic devices in each SCR Shelter facility.

2.7 Household Pets

- 2.7.1 Services animals per definition of the Americans with Disabilities Act (ADA) are not pets and will be transported (if necessary) and housed with their owner/handler.
- 2.7.2 Mass transit vehicles transporting individuals that have accompanying household pets will be directed to a SCR Shelter with an associated pet shelter.
- 2.7.3 If a SCR Shelter will not provide sheltering for accepted household pets
 - 2.7.3.1 Evacuees with pets will be directed to a Pet Services Representative who will

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provide further guidance.

2.7.4 If a SCR Shelter will provide sheltering for accepted household pets

2.7.4.1 Individuals with pets will be directed to register and process their pet(s) at the pet shelter prior to the entry into the human shelter.

2.7.4.1.1 A pet will not be allowed into the pet shelter unless its owner will be residing in the associated human shelter for the duration of the animal's stay within the pet shelter.

2.7.4.2 Pet owners will be the primary providers of basic pet care including twice daily feeding, watering, cage cleaning, and walking when possible and if indicated. The owner will be allowed access to their pet for visiting and additional care if desired. Pet shelter personnel will supplement these efforts.

2.7.4.3 Evacuees with unaccepted household pets (as defined in the Glossary and further specified within individual site-specific Annexes) will be directed by the Pet Services Representative to other resources.

2.7.4.4 Pets will be segregated into separate areas based on species, behavior, and needs.

2.7.4.5 Children under the age of 18 are not permitted in the pet shelter for safety reasons. Only the head of household will be permitted inside the pet shelter to take care of the animal(s). The head of household may designate another family member, over the age of 18, to care for the animal(s). The designated caregiver(s) will be able to take the animal outdoors or to a designated visitation area to visit family members.

2.7.4.6 Interaction between pets will be kept to a minimum to prevent the spread of disease and chance of altercations.

2.7.4.7 Animal bites and exposures will be reported immediately to the Pet Shelter Director for action.

2.7.5 Virginia Code §3.2-650 through 3.2-6570 states that it is unlawful to leave animals inside of a vehicle. If an animal is found to be abandoned in a vehicle, local animal control will be called to seize the animal.

2.8 Alcohol, Tobacco, and Illegal Drugs

2.8.1 No alcoholic beverages or illegal drugs (as defined in Virginia Code §18.2-247) are allowed in SCR Shelters.

2.8.2 Smoking and vaping will not be allowed within the shelter, and only allowed in designated smoking areas on the exterior of the SCR Shelters.

2.9 Shelter Etiquette

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- 2.9.1 The use of explicit language will be forbidden within the SCR Shelters.
- 2.9.2 The Commonwealth of Virginia recognizes the importance of personal technology devices in daily lives and as such will not restrict the use of cell phones, tablets, laptops, and personal gaming systems while in a SCR Shelter. When using technology in the shelter, residents and staff will be asked to exercise courtesy and restraint, and to take into consideration the security and solitude of all residents and staff.

2.10 Demobilization

- 2.10.1 Typically, a Congregate SCRS will remain open no longer than 30 days. Every effort will be made to transition residents home or to other housing solutions or recovery programs as quickly as possible.

3. Agency Roles and Responsibilities

This plan requires the cooperation of public agencies pursuant to §44-146.24, *Code of Virginia*, with VDSS as the lead agency per COVEOP, ESF-6.

3.1 Virginia Department of Social Services (VDSS)

VDSS is tasked by the COVEOP as the primary agency responsible for planning for and the overall operation of the State Coordinated Regional Shelters, including the coordination of shelter management and operational activities with state agencies, quasi-government and volunteer relief organizations, and contractors through the VEST and Social Services ECT. Pursuant to the COVEOP, VDSS agrees to:

- 3.1.1.1 Coordinate bi-annual shelter site assessments to ensure continued accessibility and effective use of space and update site layouts as needed.
- 3.1.1.2 Ensure Temporary Occupancy Certificates for those Congregate SCR Shelter Sites managed by the Commonwealth’s Bureau of Capital Outlay Management (BCOM), Department of General Services are requested and approved upon site activation.
 - 3.1.1.2.1 For Congregate SCR Shelter Sites with campus Building Officials, responsibility for maintaining current Temporary Occupancy Certificates for the buildings identified for Congregate SCR Shelter use remains with the Site.
- 3.1.1.3 At the time of the emergency, facilitate pre- and post- facility walk-throughs of all buildings designated for sheltering and/or shelter support to ensure a physical assessment for the recording of any damages in agreement with the Site. (See Appendix 4.)
- 3.1.1.4 Provide Congregate SCR Shelter occupancy data to facilitate the movement of traffic along evacuation routes.

3.2 Virginia State Police (VSP)

VSP is tasked by the COVEOP as a support agency to VDSS in the operating of SCR Shelter and

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agrees to:

- 3.2.1 Provide oversight for shelter security at the buildings and support areas comprising the Site's Congregate SCR Shelter.
- 3.2.2 In collaboration with the Site, Virginia Department of Transportation, Virginia Department of Military Affairs, and the local jurisdictions develop site Security and Traffic Management Plans for each pre-identified Congregate SCR Shelter.

3.3 Virginia Department of Health (VDH)

VDH is tasked by the COVEOP as a support agency to VDSS in operating SCR Shelter and agrees to:

- 3.3.1 Provide SCR Shelter support positions and fulfill responsibilities as identified within this Plan.
 - 3.3.1.1 Ensure that staffing for the Medical Needs and other health related functions is accomplished by whatever means practical to include agency personnel, Virginia Medical Reserve Corps volunteers, pre-event agreements with health care facilities, state contracts, Federal health and medical resources, and other related resources.
- 3.3.2 Develop an adjunct plan and, if necessary, include site-specific information for the sheltering of people with medical needs that is hereby incorporated by reference into this annex.
- 3.3.3 Collaborate with on-site shelter staff to provide first aid, triage, and limited medication administration assistance for individuals residing in the shelter. Additionally, first aid will be provided for staff, contractors and/or volunteers supporting the shelter, however, services cannot be provided by on-site medical staff for Workers' Compensation or other occupational health reasons.

3.4 Virginia Department of Agricultural and Consumer Services (VDACS)

VDACS is tasked by the COVEOP as a support agency to VDSS in operating SCR Shelters and agrees to:

- 3.4.1 Provide sheltering services for household pets at SCR Shelter sites that accommodate companion animals accompanying SCR Shelter residents.
- 3.4.2 Coordinate with the SCR Shelter manager to ensure necessary transportation to and from the human and pet shelters to allow owners to provide care for their sheltered pets.
- 3.4.3 Provide a Pet Services Representative to assist evacuees who present with pets at SCR Shelter sites that do not accommodate household pets.

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3.5 Virginia Department of Behavioral Health and Developmental Services (DBHDS)

DBHDS is tasked as a support agency by the COVEOP to VDSS in the operating SCR Shelters and agrees to:

- 3.5.1 Assist shelter staff and residents who are experiencing acute stress reactions or who appear to be at risk for problems with adapting as a result of the crisis or disaster.
- 3.5.2 Assist appropriate staff in responding to individuals in a state of mental health crisis.
- 3.5.3 Consult with the Medical Branch Director regarding shelter-wide behavioral health issues, interventions, programming, etc.

3.6 The Site

At the request of the Governor of Virginia, the Site has agreed to host a SCR Shelter. The Site will provide the identified buildings (as stated in their site-specific annex) to support this mission. The Site also agrees to:

- 3.6.1 Identify personnel and staff positions/units within the State Shelter Management Team and its support staff as agreed within this plan and the Site-specific annex which may include but not be limited to the:
 - 3.6.1.1 Shelter Co-Manager,
 - 3.6.1.2 Public Information Officer,
 - 3.6.1.3 Facilities Manager, and
 - 3.6.1.4 Fire Watch.
- 3.6.2 Use Site Public Information Officers (PIO) to serve in a communications capacity to include responding to media requests for information and granting interviews; providing status reports to the Joint Information Center (JIC) at the VEOC; and disseminating information from the JIC to shelter residents.
 - 3.6.2.1 In the event that the Site does not employ a public affairs professional, the Site will notify the Shelter Manager who will submit a request to the Social Services ECT for PIO support.
- 3.6.3 Develop and maintain the safety plan(s) for the building(s) used for sheltering activities.
 - 3.6.3.1 If indicated as necessary on the Temporary Occupancy Certificate for use of the facility as an evacuation shelter, develop and maintain a Fire Watch plan for each building used for resident housing and implement Fire Watch upon activation of a site as an SCR Shelter.
- 3.6.4 Develop, coordinate, and maintain necessary supporting documentation to support facilities management of the buildings and areas identified for state sheltering.

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- 3.6.5 Provide access to available voice and data communications capability and high-speed internet connectivity for SCRS equipment via their IT/communications infrastructure.
- 3.6.6 Ensure that Site identified SCRS staff complete required training as prescribed by the Site.
- 3.6.7 Provide the following based on the capabilities of the site (as identified in the site-specific annexes):
 - 3.6.7.1 SCR Shelter Sites with campus Building Officials will ensure that Temporary Occupancy Certificates or Special Use Permits, for the buildings identified for SCR Shelter use, are issued immediately after use conditions are met.
 - 3.6.7.1.1 Develop and maintain an inventory of volunteers from students, faculty and staff who agree to serve in various capacities in order to support the shelter management team, if needed..
- 3.6.8 Supply agency-specific software and applications necessary to provide full support to the agency's state sheltering responsibilities.

3.7 Virginia Information Technologies Agency (VITA)

VITA is tasked by the COVEOP as a support agency to VDSS in the operating of state shelters and agrees to:

- 3.7.1 Develop, coordinate, and maintain site-specific information for maintaining communications and information technology services for staff and residents within identified Congregate SCRS.

4. Congregate SCRS Organization

VDSS will take the lead position at the shelters and will hold the shelter manager role. It is critical that all supporting agencies report to and through the shelter manager as well as to and through their agencies. All decisions must be made in coordination with the shelter manager and any subject matter experts. A single staff roster will be maintained that includes all on-site staff - both volunteer and paid.

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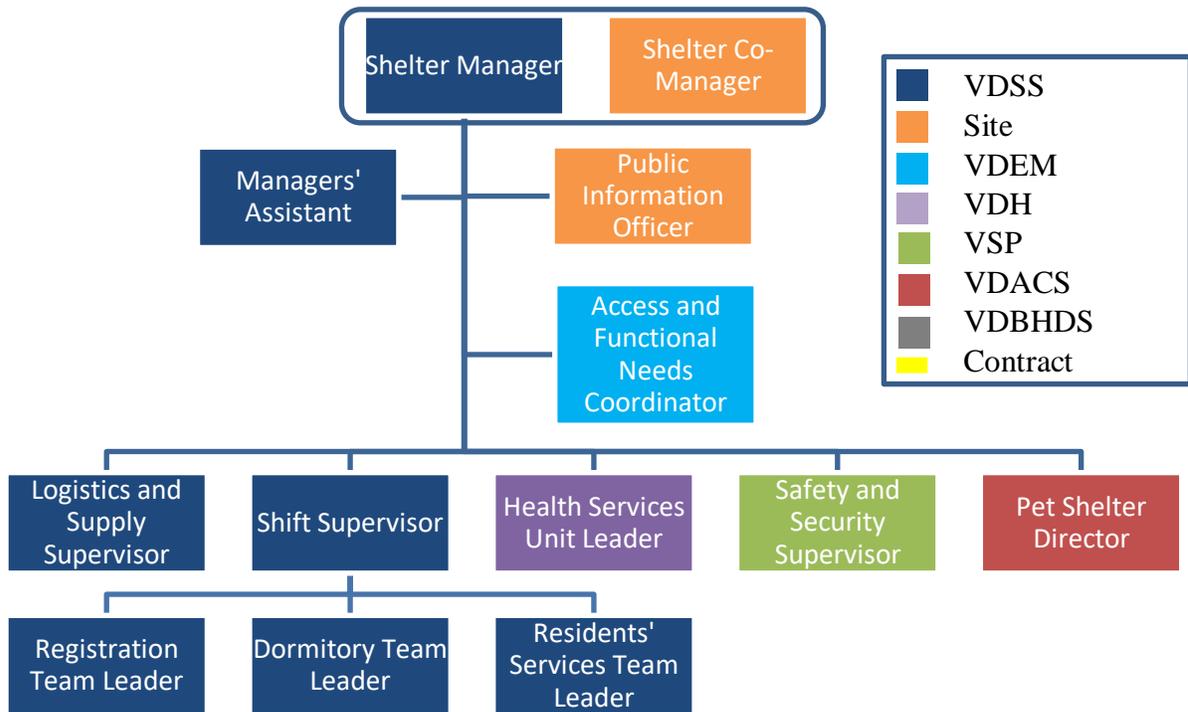


Figure 1 - Shelter Management Team

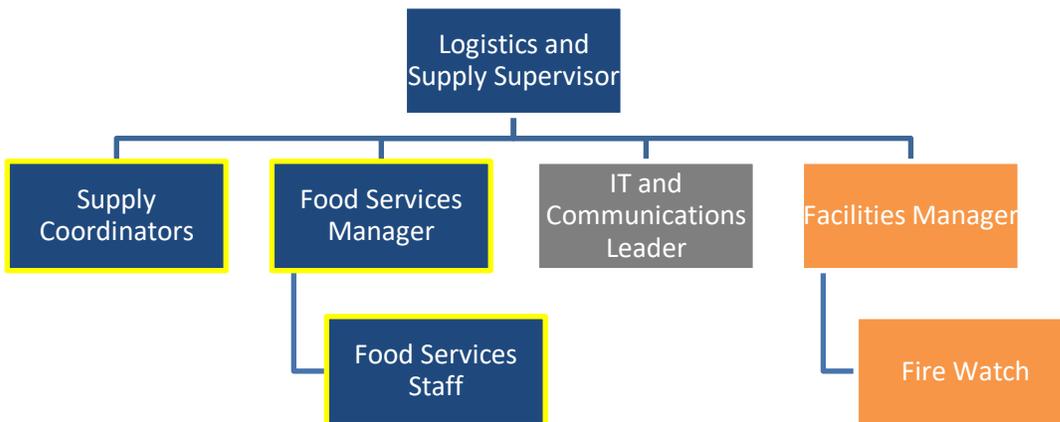


Figure 2 - Logistics and Supply

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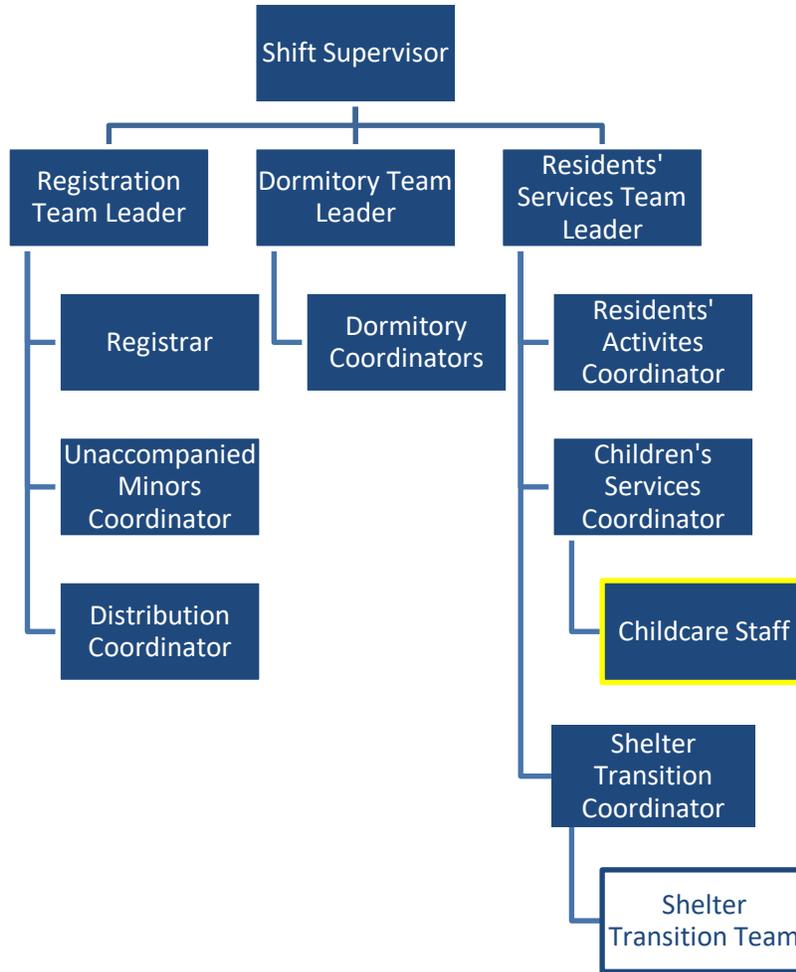


Figure 3 - General Operations

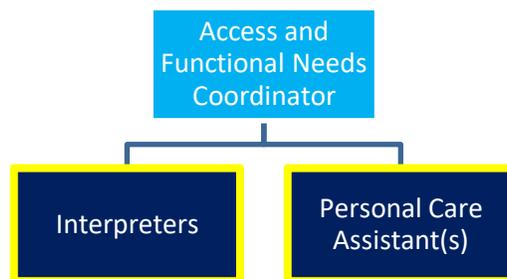


Figure 4 - Access and Functional Needs

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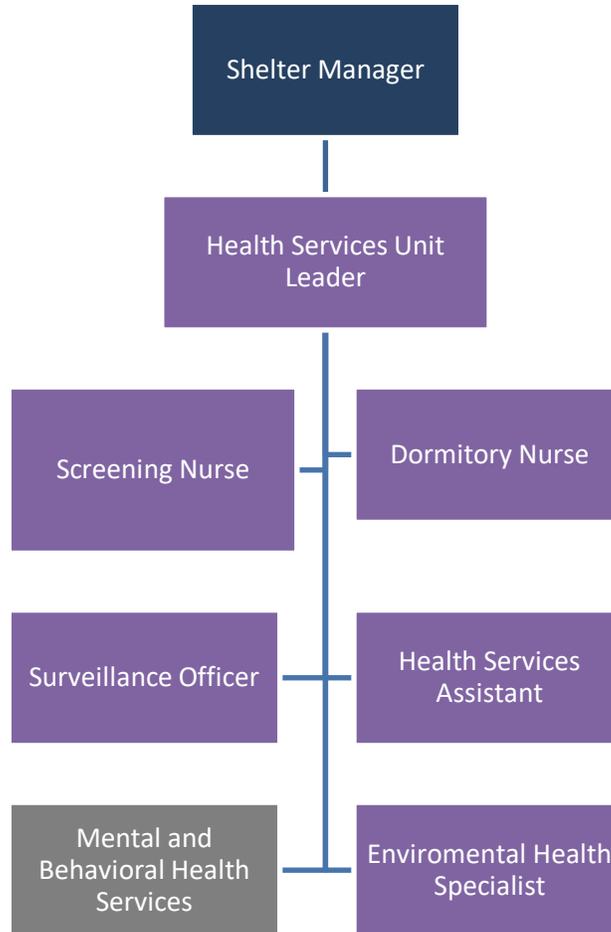


Figure 5 - Medical Branch

5. Shelter Services Progression

Shelter needs and services are characterized as life-saving, life sustaining and stabilizing the sheltering environment. The first priority is to determine when and where mass care services are to be provided in order to save the lives of those citizens that may be at risk. The first stage of the response usually begins at the community level. At a minimum, those involved undertake the necessary activities to accommodate the immediate needs in the earliest hours and days until additional help arrives. This requires coordination at all levels, and a concerted effort is needed to maintain communication prior to, in the event of and post disaster. These immediate needs may include any or all of the following:

Life Saving (0-48 Hours)

- *security*
- *registration*
 - *including communication accessibility*
- *shelter (protection from harm and physical safety)*
- *space and limited materials for sleep (10%)*
- *basic health, mental health support and accessibility for all residents*

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- *food*
- *water*

Life Sustaining (48-96 Hours)

- *materials for sleep (cots, blankets)*
- *hygiene kits*
- *establishment of structured routines*
- *opportunities for children and families to participate in their own recovery*

Informational needs (Stabilizing the Shelter Environment) 96+ Hours

- *resident transition*
- *status of disaster and relief efforts*
- *types of available assistance*
- *process of obtaining assistance*

The Commonwealth has the capability to provide pet shelters, general population shelters, and medical areas within general population shelters. State-coordinated regional shelters will provide only basic, necessary services and supports to help ensure disaster survivors are able to stay safe, healthy, and can begin the recovery process. These services will include dietary services, dormitory services, functional needs support services (FNSS), and may include pet sheltering services.

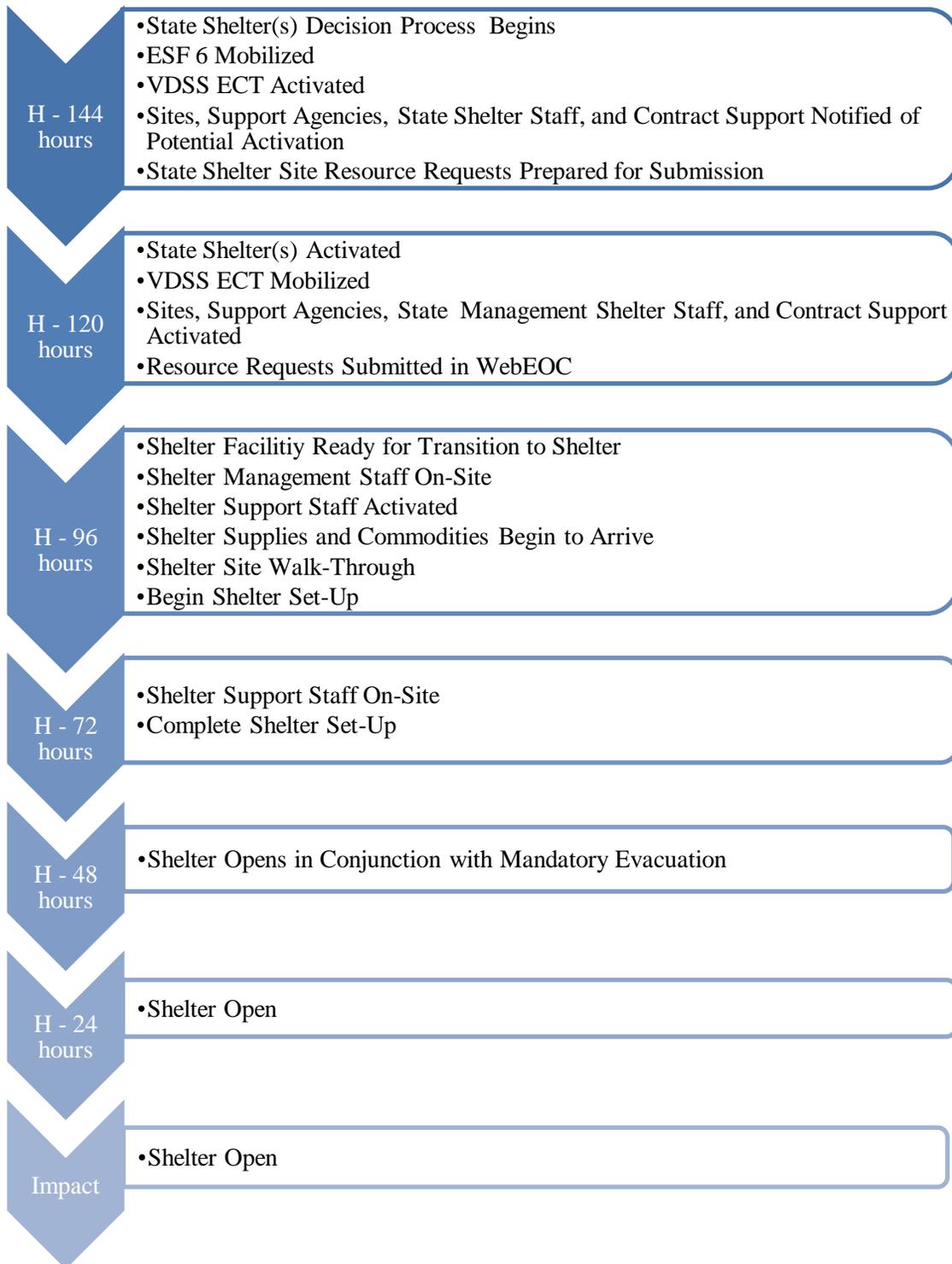
6. Sequence of Events

This sequence of events describes the preparation by VDSS and supporting agencies for the opening of shelters and is based on the planning assumption that SCR Shelter operations are required as a protective measure in support of evacuations beyond the capabilities of local jurisdictions and are occurring or expected to occur beyond jurisdictional boundaries. These timelines are only guides and will be adjusted as necessary based on the event.

To open a SCR Shelter with full and complete services and supports, the activation decision must occur 5 days (120 hours) prior to the onset of the event (i.e., 5 days prior to onset of tropical storm force winds in the Commonwealth). Any delay in this timeline, will create deficiencies in the immediate capabilities of the activated Site(s). If the state shelter activation decision occurs less than 3 days (72 hours) prior to the onsite of the event, the consequences to the operation of the shelter could be detrimental to staff and residents as that sufficient safety, security, accountability, and supplies will not be on-site. At that point, state shelter activation should only be considered for opening post-event with consideration to safe travel for staff and transport of supplies.

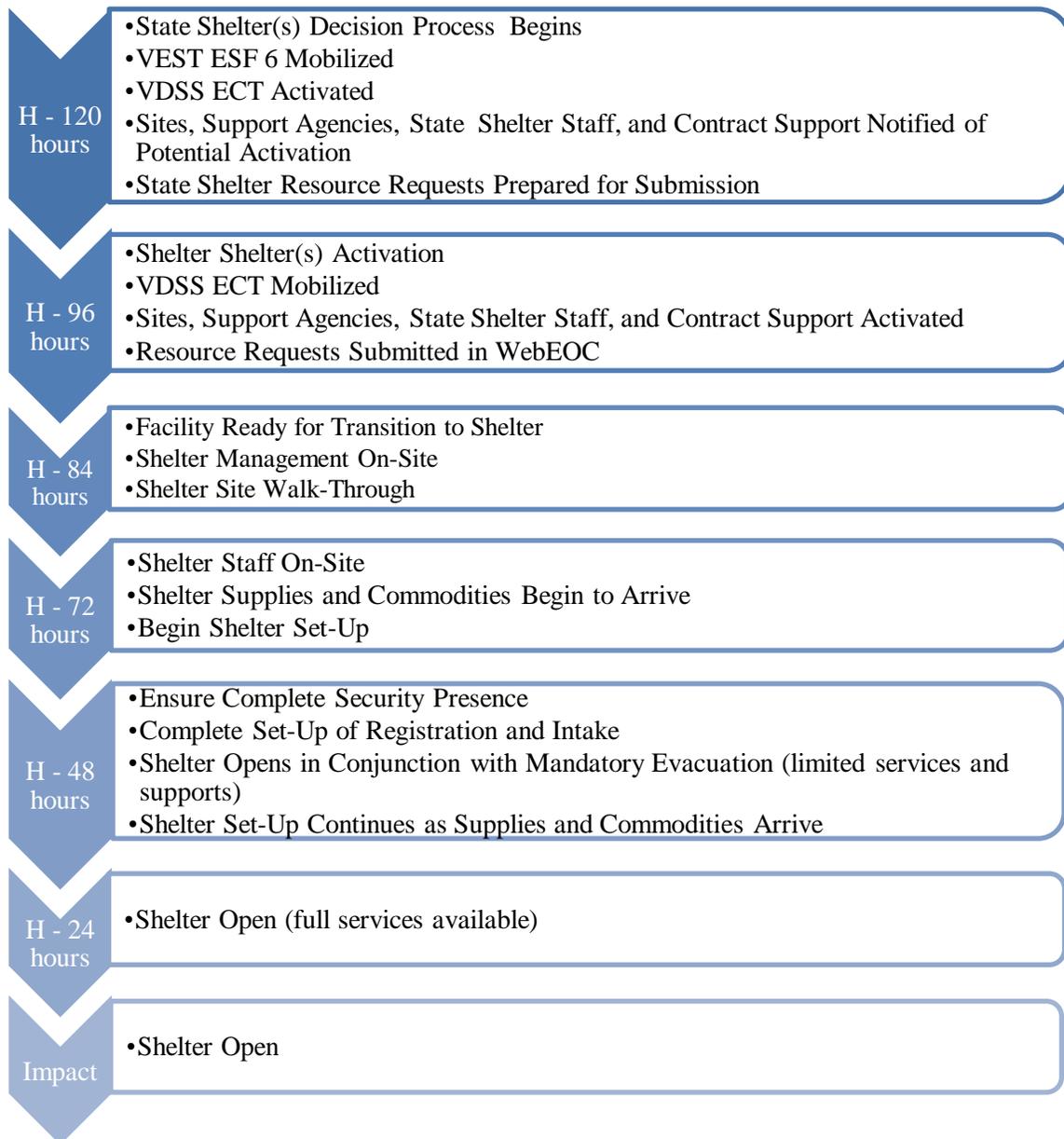
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6.1 5 Days Pre-Event Activation



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6.2 4 Days Pre-Event Activation



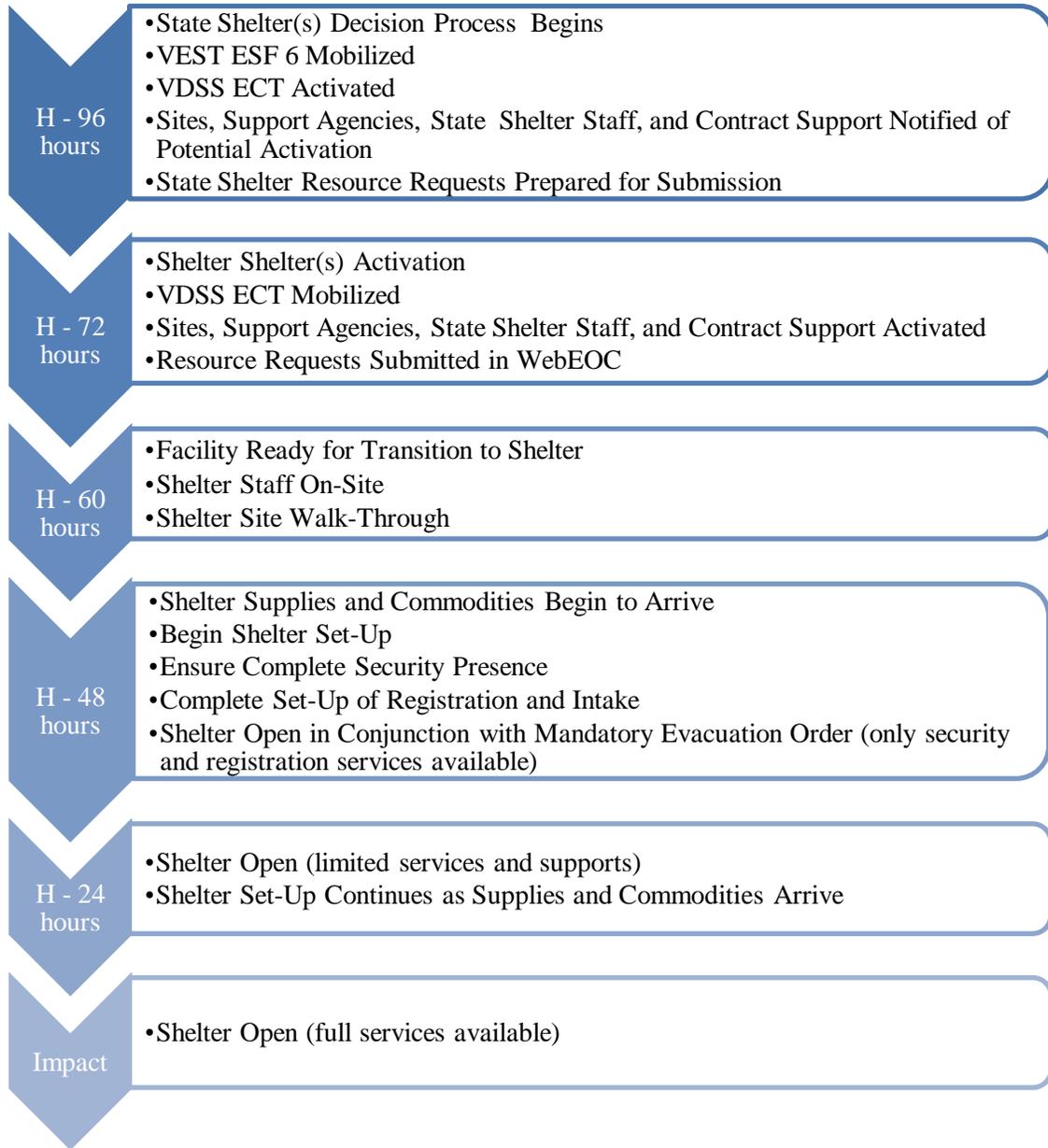
6.2.1 4 Day Schedule Limitations

- 6.2.1.1 Shelter Management will have less than 24 hours to prepare from activation notification to on-site.
- 6.2.1.2 Shelter will not be fully prepared or set-up to provide all services immediately upon opening.
 - 6.2.1.2.1 Not all supplies and commodities may be on-site and ready for use.

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- 6.2.1.2.2 The first 24 hours of meals may not be hot and may not be able to meet all dietary requirements.

6.3 3 Days Pre-Event Activation



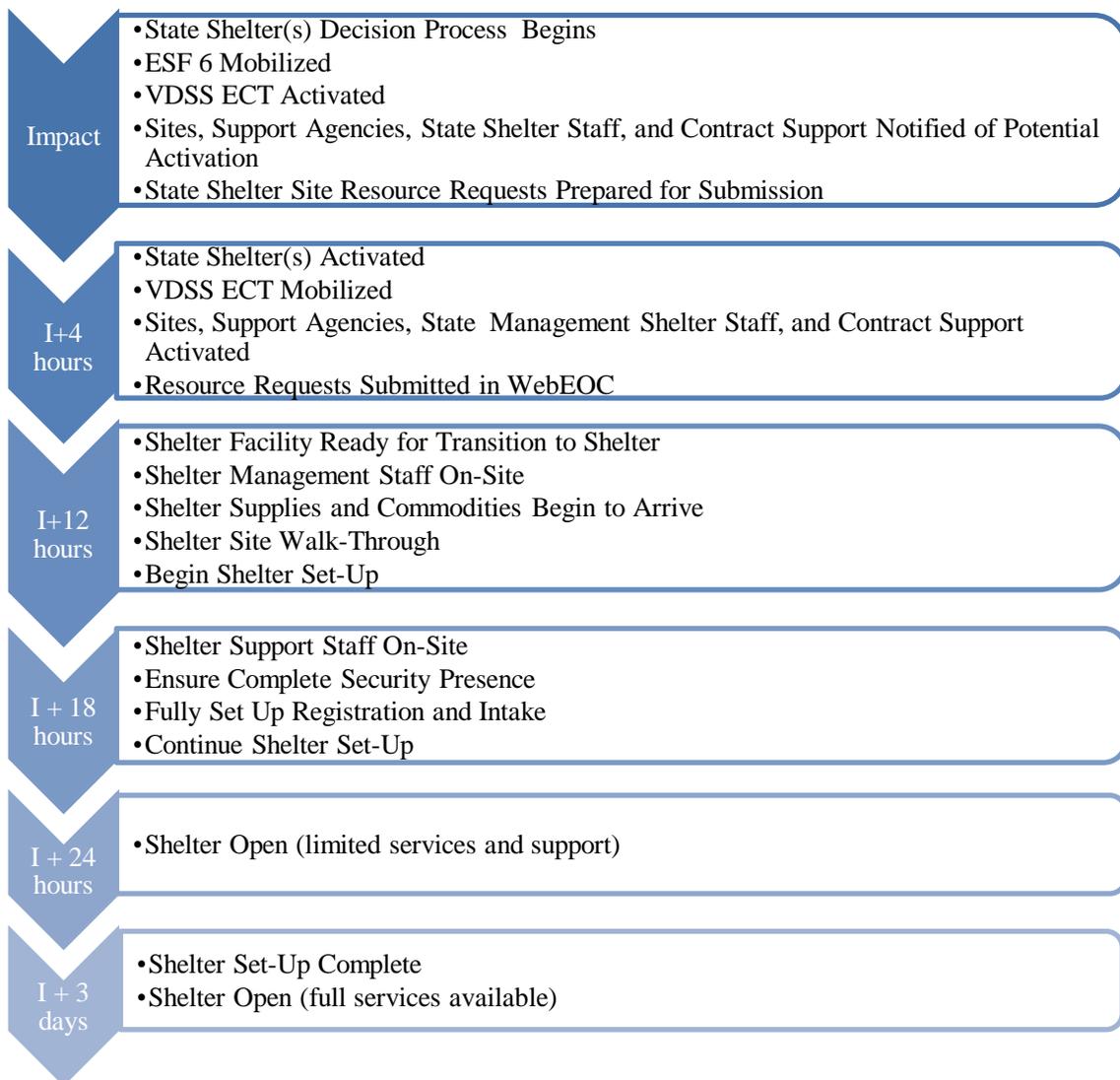
6.3.1 3 Day Schedule Limitations

- 6.3.1.1 Shelter Management will have less than 24 hours to prepare from activation notification to on-site.
- 6.3.1.2 Shelter Management will not have the opportunity to prepare for acceptance of resources including personnel.

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- 6.3.1.2.1 Shelter will not be fully prepared or set-up to provide all services immediately upon opening.
- 6.3.1.2.2 Not all services, supplies, and commodities may be on-site and ready for use.
- 6.3.1.2.3 Dormitories may not be set up to allow all residents to have cots; cots may only be available for those with access, functional or medical needs.
- 6.3.1.2.4 The first 48 hours of meals may not be hot and may not be able to meet all dietary requirements.

6.4 No Notice Event Activation



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7. Concept of Operations

7.1 Planning

All SCRS lead and support agencies will participate in the development and maintenance of the *State Coordinated Regional Shelter Plan*; each agency will prepare operational procedures and guidelines to implement the roles and responsibilities assigned to them in the Plan. Each agency will also develop the training and/or certification requirements for the shelter positions they will deploy to shelters and will prepare a training and exercise schedule to ensure that assigned staff receives adequate opportunities for training.

Each agency should prepare a generic list of necessary supplies, commodities and services needed and then develop site-specific needs lists for each pre-identified Sites. The agency will then work to develop a cache of these goods, enter into contracts or Memorandums of Understanding (MOU)/Agreement (MOA) for their fulfillment, or develop pre-scripted mission requests that would be entered into WebEOC upon SCR Shelter activation.

7.2 Alert, Notification and Shelter Activation

VDEM, through the VEST, will ensure situational awareness of any potential or ongoing disaster to its ESF partners. Each ESF maintains its own notification capability and is responsible for ensuring their ESF and operational support staff receives adequate and necessary information regarding the incident. ESF 6 will ensure that the SCR Shelter sites receive situational awareness information.

If there is a potential that SCR Shelter(s) may be needed, the VEST will coordinate the Hurricane Evacuation Working Group (note - this group or similar can be brought together for events outside of hurricanes) to coordinate and discuss the most appropriate evacuation and sheltering actions to take in the event. ESF 6 will request Site availability for the potential timeframe needed; although consideration of conflicts will be taken in determination of selected Site(s), not all will be avoided. The Hurricane Evacuation Working Group will develop a recommendation of evacuation and sheltering actions for consideration of VEST leadership and the Governor.

Upon the decision to activate one or more SCR Shelter sites, the VEST Operations will input a mission assignment for activation of the selected SCR Shelter site(s). ESF 6 will then ensure that the supporting agencies and Sites receive written notification of the activation for their records as well as the activation, deployment, and operational timeline for each Site. VDSS, VDH, VDACS, VDBHDS and VSP are all members of VEST and will execute their own plans and procedures to open and support SCR Shelters including alert and notification to their supporting agencies, staff (including the Adjunct Emergency Workforce), and contractors. Volunteers from cooperating non-profit organizations to augment state staff will be coordinated and deployed through the VEST ESF 17 as requested by SCR Shelter support agencies/ESFs.

Upon notification of activation, an activated Site should begin preparing the buildings and spaces to be used for sheltering purposes or reception of shelter staff, commodities, and services. This might include the emptying of space, cancelling events or activities, closing lots, etc.

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7.3 Deployment

Each agency is responsible for the deployment of any and all resources necessary for the fulfillment of their roles and responsibilities to support SCR Shelters. This includes supplies and commodities, services, and staff. The caches, contracts, MOU/MOAs, and/or pre-scripted mission requests created during the planning phase will be initiated and deployed by each responsible agency. ESF 6 should be made aware of any resources that will be delivered to the Site(s), their anticipated time of arrival, and the on-site point of contact that will receive the delivery. Each agency sending staff and or contractors to a Site must notify ESF 6 of the name, affiliation, shelter role, and anticipated time of arrival prior to entry to the Site. ESF 6 will ensure that the Shelter Manager receives this information to ensure overarching awareness of all incoming resources to allow ease of access to the facility upon arrival.

Each agency will also ensure that their assigned staff and contractors receive appropriate assignment details including travel instructions, information on meals and snacks, and housing. Each agency is responsible for housing/billeting their own staff; most Sites do not have a staff dormitory area to allow the greatest accommodation of evacuee residents. Meals will not be available at the SCR Shelter until the Site officially opens; after that point, staff will be provided three meals daily (including the overnight staff) as well have access to continuous snacks and beverages.

7.4 Set-up and Organization

The onsite shelter management team is responsible for the overall shelter operations of the Site. The Shelter Manager is the lead for the full operation of the Site in direct coordination with the Shelter Co-Manager.

When the event timeline warrants, shelter management staff will be the first on-site and will be given the opportunity to meet and prepare the site for reception of staff. Shelter management, in all instances, should meet immediately upon arrival meet, go over the organization of and layout of the Site, review the shelter opening timeline, discuss the actions to take to prepare the site for operation, deliver staff processing and time management requirements, and review the daily reporting and operational schedule (See Appendix 3 for an example; this schedule will be created by the ECT and ESF 6 based on each event's needs.).

7.4.1 Site Walk-Through

Prior to setting up the Site, a full walk-through of the facility must be completed to assess the building(s) to be used for sheltering functions for any pre-existing issues or damages. This is the responsibility of the Logistics and Supply Supervisor and is completed in conjunction with the Facilities Manager. This should be done on paper and supported by either video and/or photographs (see Appendix 4).

7.4.2 Personnel Reporting and Accountability

SCR personnel will include staff, volunteers and contractors.

All SCRS personnel must have badge identification that is worn at all times while on-duty in the facility; this identification can be agency or business ID.

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All personnel reporting to the Site must report immediately to the Registration and Intake area for check-in and to receive an ID band (orange) for clear delineation of staff and resident as well as provide access to food and snack services. Personnel will also receive an ID code for use in time tracking that will be adhered to the agency badge ID if one is not already in place. Until the Registration and Intake area is set up, staff must check-in with the Shelter Manager and sign-in and out using a paper form.

Upon initial entry into the shelter, personnel must ensure that the shelter has appropriate contact information to include shelter position, shift (day/night), e-mail and phone number that will be used during the shelter event. This information will be collected to prepare a shift-specific contact list by the Assistant to the Shelter Manager.

Once the Registration and Intake area is operational, all personnel must check-in and out using the registration system time tracking mechanism.

7.4.3 Safety and Security

Security must be fully in place to ensure resident and staff safety as well as secure space for supplies and commodities. No Site will open to residents until the Security and Security Supervisor has ensured that all security measures are in place and notifies the Shelter Manager of such.

7.4.4 Supply and Commodity Management and Accountability

It is critical that as supplies and commodities are brought on-site that they are received, logged as to agency/owner, and assigned to a location within the shelter or in staging. The Logistics and Supply Supervisor will maintain a full inventory of on-site supplies and commodities.

7.4.5 Site Preparation

Until contract logistics teams arrive on-site at the activated SCR Shelter, any physically-capable staff member or volunteer may be requested by the Shelter Manager to prepare the shelter to receive residents.

The first two areas that should be set up are the Shelter Management area and Registration and Intake area including medical assessment. After these areas are complete, attention should be given to dormitories followed by service areas. Each site-specific annex to this plan includes a site layout with service and dormitory areas identified.

7.4.5.1 Voice, Data, and Radio Communication

Communications capabilities are paramount to ensure the successful completion of a complex multi-agency sheltering operation. Shelter staff will use agency-issued equipment, VITA/NG caches, or VDEM Emergency Contract Service equipment. Security, Law Enforcement, and Emergency Medical Services elements deployed to support shelter operations will use their own radio communications equipment, frequencies and protocols. Handheld radios and/or cellular telephones will be used for communications among shelter services teams not involved in Security, Law

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Enforcement, or Emergency Medical Services allowing rapid person-to-person communications to ensure the safety of shelter staff and clients. Licensed Amateur Radio Operators will be sought from ARES/RACES membership to provide back-up radio communications.

7.4.5.2 Signage

Every identified Site has basic, large-scale English-language signage and posting/hanging supplies. This signage may need to be supplemented for the specific needs of the individual shelter site and potential population.

7.4.5.3 Management Area

The shelter management room will house the Site Management Team. The site will have sufficient tables and chairs for the management team. It will have data (internet and Microsoft Office), voice (digital and analog), and radio communication capabilities. It will have digital and written presentation capability. This area will also have photocopy, scanning and printing capabilities.

7.4.5.4 Human Registration/Intake Area

The registration and intake area will be set up to support a significant number of incoming evacuees at any given time. A sitting area needs to be prepared to allow incoming evacuees a place to wait; a cueing system also needs to be put in place. Registration tables will need to be placed in a staggered format to allow some level of privacy and to limit noise interference between conversations. Each registration table needs a chair for the registrar as well as at least two chairs for the evacuees; Communication Kits should also be available within the registration area for use by the registration staff. The medical assessment areas need to be set up with a desk and three chairs (similar to the registration area) but must have privacy curtains in place. Registration/intake desks and medical assessment desks will be set up with data (internet) capabilities. There may be access to use of a double-receiver phone at each table (a long table may house two registrars) for access to phone interpretation services, if needed. Each site will have necessary identification card scanners and access to photocopy, scanning and printing capabilities. This group will have radio and/or cellular phone communications based on position.

7.4.5.5 Pet Registration/Intake Area

Pet registration desks will be set up to allow each pet registrar a table and chair. One chair should be in place for the evacuee who is registering the pet. The area must have data (internet) capabilities to support the use of the registration system. Each table will have necessary identification card scanners and access to photocopy, scanning and printing capabilities. This area will have radio and/or cellular phone communications based on position.

7.4.5.6 General Population Dormitory

The general population dormitory will be set up according to the Site layout. For sites that require protective flooring, no cots should be placed in the area until that flooring is laid. Cots will be numbered to allow for assignment to individuals and allow the

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capability to quickly find specific residents within the dormitory if necessary. Special attention should be made to spaces near electrical outlets and those areas should be reserved for individuals with electrical dependencies. This area should have radio access to the other portions of the Site.

7.4.5.7 Medical Needs Population Dormitory

The medical needs population dormitory will be set up according to the Site layout. For sites that require protective flooring, no cots should be placed in the area until that flooring is laid. Cots will be numbered to allow for assignment to individuals and allow the capability to quickly find specific residents within the dormitory if necessary. Special attention should be made to spaces near electrical outlets and those areas should be reserved for individuals with electrical dependencies. This location within the SCR Shelter will be set up with at a minimum of one data (internet for accessibility to registration application and fax), voice (phone), and radio communications. It will also have access to photocopy, scanning and printing capabilities. This area will have radio and/or cellular phone communications based on position.

7.4.5.8 Pet Dormitory

The pet dormitory will be set up according to the Site layout. For sites that require protective flooring, no crates or cages will be set up in the area until the flooring is laid. The area will have radio and/or cellular phone communications based on position.

7.4.5.9 Food and Snack Service Area

The food and snack service area(s) will be set up to best be able to quickly scan individuals bands and receive food/snack/beverage items. Each site will require a different solution to best complete this task. The Food Services Manager in coordination with the Distribution Coordinator should determine the layout necessary. Each food/snack/beverage service area will require electrical and internet connectivity to allow for ID badge scan and distribution capability.

7.4.5.10 Residents' and Children's Activities Area

The resident and children's activities area will be set up to allow easy distribution of children's activity items as well as advertise and register up for any resident activities. Each site will require a different solution to best complete this task. Tables will be needed to organize children's activity items and chairs should be in place to allow staff to rest. The area will require electrical and internet connectivity to allow for ID badge scan and distribution capability.

7.4.5.11 Quiet Room

This room is intended to be minimal stimulation. It would be helpful for there to be electrical and internet access for those that may need it for medical or mental health (music in headphones, etc.).

7.4.5.12 Resident Communications Area

This area is a computer lab and recharging station for residents. This area should have computers with internet access and a phone charging area with a multitude of outlets and

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charger types in the event a charger was forgotten. Internet access should be managed or monitored to reduce misuse of the system.

7.4.5.13 Resident Transition Coordination Area (only opened after Shelter Manager deems it necessary)

This area will be set up with data (internet) capabilities to support programmatic counseling services. There may be access to use of a double-receiver phone for access to phone interpretation services, if needed. All counselors and supervisors will have phone access and the supervisors will have radio communications.

7.4.6 Shelter Schedule

The onsite shelter management team is responsible for the development of daily shelter activities schedule. The schedule should include meal service times, shower schedules (if necessary), lights on/off times, resident briefings, and any other important resident activities that are scheduled. The schedule should be posted throughout the shelter facility and done using both written and pictures to ensure delivery of message. (see Appendix 10)

7.4.7 Reporting and Communication

The onsite shelter management team is also responsible for coordinating with the Social Services ECT and the VEST to prepare a reporting and communication schedule to ensure situational awareness, share important updates and discuss and problem solve issues. The schedule should include, but not be limited to, situation report deadlines and conference call times, expected participants, and numbers. This schedule should be posted in the Command Center either digitally or in printed format for clear visibility.

7.5 Reception

7.5.1 Greeting and Registration

The first impression the evacuees will have of the shelter will be during the initial greeting and registration period. It is crucial that evacuees feel welcome and safe.

Those individuals presenting with animals will be assessed to determine if the animal is a service animal and if not, the individual will be asked to register their pet at the associated pet shelter or given housing options (as developed by VDACS per site) for their pet while they stay in the shelter.

Family groups will receive the shelter rules and disclosure statement for their review. If they are unable to read and understand the document, it is incumbent on the registration staff to assist in determining how best to ensure the information is received, whether through reading and explanation or translation services.

Family groups will be registered together per the Registration and Intake Standard Operating Procedures, linking all family members, pets, and personal items together.

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7.5.2 Needs Assessment and Provision of AFN Equipment and Services

As evacuees are registered into the shelter as residents, they will be assessed for immediate needs during registration, and if deemed as needed, medical assessment.

The registration team will address those needs visually evident such as need for mobility assistance or medical emergencies; during registration, the registrar will ask simple questions to determine any AFN that needs to be addressed including functional, medical, or mental health issues (see Appendix 8). Those identifying as having needs may be asked, but are not obligated to, participate in a more thorough assessment of their needs.

Many needs can be met using on-site services or supplies; or can be addressed by requesting additional services or supplies through the request process. The Registration Team Leader will coordinate with the Access and Functional Needs Coordinator to use on-site resources or request additional resources.

For more complex medical or mental health issues that may need additional assessment for services, the registrar will direct the resident to the medical assessment team.

7.5.2.1 Loaner Durable Medical Equipment (DME)

The VEST will coordinate the provision of temporary, or loaner, DME to individuals residing in SCR shelters. This DME is for use in the shelter and will not be taken home with the individual. The AFN Coordinator will be aware of these supplies that are on-site and will assist in their assignment to residents when needed.

7.5.2.2 Replacement DME

When notified that an individual residing in an SCR shelter has lost his/her DME or it has been damaged by the event, the AFN Coordinator or medical shelter staff will assist the individual with locating permanent replacement through insurance and/or community agencies and organizations. If these efforts are unsuccessful, the staff member or AFN Coordinator will refer the individual to a case manager and/or long-term recovery group, if one is established, for further assistance.

7.5.2.3 Personal Assistance Services (PAS)

If an individual requires PAS, but does not have a care provider, the shelter will provide PAS to ensure the individual has equal access to the shelter. PAS will be coordinated through the AFN Coordination and may be provided through a volunteer organization or through a contract with personal care agency(ies).

7.5.3 Unaccompanied Minors

Children, ages 0-17, may arrive at a shelter without a parent or legal guardian. These children are considered “unaccompanied minors.” A child who is found without parents outside of a public shelter is considered a “found child.” These minors are at high risk for abuse and increased levels of stress and trauma during disasters. Regardless of how the minors arrived at the shelter or how many minors are affected, the agencies listed below will be responsible for coordinating their care and reunification with family members.

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Immediately upon identification of an unaccompanied minor(s), the Unaccompanied Minors Coordinator (UMC) and Shelter Manager should be notified; he/she shall immediately notify VDSS Child Protective Services (CPS) and Virginia State Police of the presence of unaccompanied minors to begin the reunification process.

The UMC will take control over the minor/minors and provide appropriate supervision with a minimum of two adult volunteers or staff that has passed a background check until a VDSS CPS case worker takes over. The UMC will attempt to collect parent/guardian information from the child(ren) and will provide all information collected to VDSS CPS.

Once assigned the CPS case worker(s) is assigned he/she will take necessary action to provide for the needs of the child(ren) until the parents or legal guardians can be located and are able to assume responsibility for the unaccompanied minor(s). If unable to make contact with the parents or legal guardian, CPS will assume emergency custody and request that VSP notify and request the help of National Center for Missing and Exploited Children (NCMEC) in family reunification. CPS will work in partnership with NCMEC to facilitate family reunification. If efforts are unsuccessful in locating the parent(s) or legal guardian(s) of the minor(s), CPS will follow the normal procedures for filing the Emergency Removal Petition with the local court.

The National Center for Missing and Exploited Children (NCMEC) assists with locating missing children and reunification of unaccompanied minors with family and operates the Unaccompanied Minors Registry. NCMEC will facilitate family reunification services when requested by VSP or another law enforcement agency. NCMEC assistance can be requested by any law enforcement agency when one unaccompanied or missing child is affected. Field personnel from NCMEC will typically arrive within 4-5 hours, as able depending on the disaster situation. NCMEC personnel are the only third-party individuals allowed to interview and photograph unaccompanied minors in shelters. Other than staff from the National Center for Missing and Exploited Children (NCMEC), no photos of the children or interviews by third parties will be allowed.

VSP will likely receive incoming calls about missing and found children and will handle those calls according to their own procedures. When requested to do so by VDSS CPS, VSP will request assistance from NCMEC. NCMEC is a Department of Justice agency and requests for assistance, other than in a presidentially declared disaster, must come from a law enforcement agency.

7.5.4 Health and Medical Assessment

A public health intake assessment will triage individuals and determine appropriate shelter placement or the need for referral to a healthcare facility. Intake assessments evaluate for general health maintenance needs and conditions that pose a communicable disease risk or may be beyond the capabilities of the shelter. Individuals who cannot be safely managed in the shelter will be referred to local healthcare facilities for evaluation, treatment, and further disposition. Individuals will not be denied access to the shelter solely because they cannot or do not provide their own personal care services provider.

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Protected Health Information (PHI) and Personal Information (PI) obtained by health and medical staff will be maintained in accordance with VDH Policy #1.01 – Confidentiality.

7.5.4.1 Consumable Medical Supplies (CMS)

Many individuals who require CMS may not bring it with them to the shelter. The SCR Shelter will provide CMS to residents to the best of its ability.

7.5.5 Dormitory Assignment

Most residents will be able to be housed in the general population dormitory. However, the registration team, in consultation with the medical assessment team, the AFN Coordination, and the resident and his/her caregiver, will direct residents to the appropriate dormitory with priority given to the individual's preferences whenever possible.

Whenever possible, family members of residents who are housed in the medical needs section should be allowed to stay with their family member.

7.6 Care

7.6.1 Resident Tracking

As residents enter the dormitory areas, the Dormitory Team (general population) or Nursing Group (medical population) will assign appropriate space (grouping of cots) to meet the needs of the family/group. As individuals are assigned to spaces, the dormitory staff will annotate the cot number along with the ID number of the resident. Additional information on space assignment can be found in the Dormitory Standard Operating Procedures.

Residents will also be tracked as they exit and reenter the shelter through the registration area. Residents will be encouraged during briefings to check-out and in as they move in and out of the shelter. This will allow the shelter to maintain a current roster of people inside of the shelter in the event of an emergency that requires evacuation of the building(s).

7.6.2 Shelter Observations

Interacting with shelter residents and building relationships is the key to maintaining a content resident population.

All staff and volunteers have a responsibility to ensure the safety and security of the shelter. Observing the interactions, conversations, and activities of the residents and immediately addressing any issues or concerns will alleviate the potential for larger problems within the population. Every staff member and volunteer is encouraged to engage with any resident and empowered to work within the shelter organization to address any issues or needs. Staff and volunteers do not have to engage in situations where they fear for their safety; in those situations, security should be immediately notified.

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7.6.3 Information Sharing

Shelter residents should have access to situation and shelter information at all times; residents should have the opportunity to receive direct briefings at least twice daily. Opportunities and formats for delivery of information will be dependent upon the capabilities of the shelter site, but every effort will be made to provide information so all residents receive it in a language and format that they can understand. Resident access to televisions with national and local news feeds, to computers with internet access, and/or bulletin boards with posted information are multiple solutions to ensure residents maintain an understanding of the situation “at home” and at the shelter as well as services and support available to assist them.

7.6.4 Meal and Snack Service

Prior to the official opening of the shelter site, shelter staff will be reimbursed for meals based on daily per diem rate as listed in the Commonwealth of Virginia Commonwealth Accounting Policies and Procedures (CAP) Manual Topic 20335: State Travel Regulations. Once the shelter opens, all meals will be provided at the site for staff and these meals will need to be accounted for in staff travel reimbursement requests. Meals will not be reimbursed once they are provided on-site.

Meals will be provided three times daily upon the official opening of the shelter site to all staff, volunteers and residents onsite at the time the meal is served. Overnight staff will be offered a midnight meal (equal to the day-shift lunch meal) while on-shift. Water and light snacks will be available continuously for both staff and residents.

All meals will be served at a time such that in-coming and out-going staff will be able to receive breakfast, dinner and a mid-shift meal (either lunch or at midnight) without having to arrive earlier than scheduled.

Meal	Service Time
Breakfast	7:00 – 8:30 a.m.
Lunch	11:30 a.m. – 1 p.m.
Dinner	6 – 7:30 p.m.
Midnight Meal (staff only)	11:30 p.m. – 12:30 p.m.

Table 1 - Meal Service Schedule

Meals and snacks will be made available to those with medically necessary dietary requirements (e.g., lactose intolerance, peanut allergy, diabetic) including age appropriate diets for infants and toddlers upon request of the person or their guardian/caregiver. Non-medical dietary restrictions will be accommodated as best as possible if, at registration, the restriction is noted.

7.6.5 Hygiene Care

Once the supplies arrive (within the first 48 hours), residents will have the ability to receive hygiene kits to support their needs while in the shelter. Sites are chosen with sufficient onsite facilities or supported by portable toilet and shower facilities to meet the needs of the anticipated maximum population of the site. It may be helpful for the site to

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prepare a shower schedule to limit bottlenecks and to allow the opportunity for cleaning and maintenance.

7.6.6 Public Health and Medical Support Services

Public health and medical support services that will be offered in a shelter include: first aid, health assessment and screening, limited medication administration assistance, case management, environmental health services (general facility assessment, food and water safety and monitoring), communicable disease prevention and control services, and as needed, WIC/nutrition services.

Medical services provided by VDH will be in accordance with the VDH Emergency Response Plan, Annex H: Mass Care. The level of care that can be provided in the shelter will depend on the on-site healthcare providers' scope of practice and training, the overall health status and needs of the individual patient, availability of supplies to meet the patient's needs, and whether or not the facility infrastructure can meet the patient's needs (i.e. electricity for nebulizer).

7.6.7 Resident and Children's Activities

Resident Activities will be coordinated post-impact. These activities will be both functional and recreational to allow shelter residents as individuals and families to maintain independence as well as alleviate boredom, boost morale, and deter unwanted behavior within the population.

Children's activities and resources will be available within 48 to 96 hours of shelter opening. All children's activities will require parental or caregiver participation; resources will require parental/caregiver presentation for receipt.

7.6.8 Resident Services

Post impact and within 4 days of the shelter opening, ground transportation between the Site and critical daily living facilities (e.g. grocery store, laundromat, doctor's office) will be provided. Additional ground transportation will only be provided as requested by the Shelter Manager and approved by the Social Services ECT.

Child care, school activities, and/or shelter transition coordination will only be made available if determined as a need post-impact.

7.7 Transition

Having received reports through the VEOC, the VEST (through ESF 6) will provide the most current available damage data to the SCR Shelters to assist in assessing individual impacts to shelter residents. Family plans will be developed for these displaced persons for intermediate and long-term housing and other recovery needs. (See Appendix 13.)

7.8 Demobilization

7.8.1 Staff Time Record Collection, Verification and Approval

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The staff time paper timesheets must be verified, approved (signed by shelter manager), copied and collated prior to the shelter staff member demobilizing from the Site. Each agency that supports the shelter may have a different time sheet document, but each staff member from that agency is responsible for understanding and completing the timesheet correctly. Digital and/or paper sign-in and sign-out documentation will be used to verify hours worked prior to signature. The Assistant the Shelter Manager will be responsible for ensuring that this documentation is completed, collected, and submitted to the Social Services ECT upon final demobilization of the Site.

The original timesheet will be maintained by the staff member for submission to their home agency upon return to normal work.

7.8.2 After Action Documentation

Every volunteer, contract or state staff member will be given the opportunity to provide feedback regarding their shelter deployment, activation, operation, and demobilization experience. It is this feedback that helps find areas of strength and improvement to build stronger plans and procedures. An after-action feedback form is in Appendix XX. It is the responsibility of the Shelter Manager to ensure that all shelter staff receives these prior to their demobilization, and the responsibility of the Assistant to the Shelter Manager to collect and submit them to the Social Services ECT upon final demobilization of the Site.

7.8.3 Site Clean-up

Shelter staff and volunteers should do their best during shelter demobilization to return the Site to its original status as best as possible. It is not the responsibility of the staff to fully clean or sanitize any the site, equipment or supplies, but it is their responsibility to ensure the Site is tidied and equipment and supplies returned to a single collection point at the site for inventory.

The Social Services ECT or VEST will coordinate with the Site to ensure the buildings and grounds are returned to pre-shelter status including fully cleaning/sanitizing the facility and repairing any damage as identified during the final walk-through (see 12.8.6).

7.8.4 Inventory

To fully account for items used during the sheltering operation, finalize any procurement requirements, and ensure the best outcome of any request for reimbursement of funds, the Logistics and Supplies Supervisor will ensure all supplies and commodities be inventoried upon demobilization of the Site to determine the full extent of inventory used in the event.

7.8.5 Supply and Equipment Return

Once equipment, commodities and supplies are inventoried, it will then be incumbent upon the Logistics and Supplies Supervisor to notify originating agencies of remaining items at the shelter that need to be collected. Each agency will be responsible for the final disposition of the equipment, supplies, and commodities they brought on site.

7.8.6 Final Walk-through

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After final demobilization of all commodities and supplies in the site, a full walk-through of the facility must be completed to assess the building(s) and exterior spaces used for sheltering functions for any issues or damage. This is the responsibility of the Logistics and Supply Supervisor and is completed in conjunction with the Facilities Manager. This should be done on paper and supported by either video and/or photographs (see Appendix 4) then compared to the initial pre-opening site walkthrough to determine shelter operations caused damage.

8. Authorities and References

8.1 State

- 8.1.1 *Commonwealth of Virginia State Coordinated Regional Shelter Plan (2019 and as amended)*

Host Institution		COV SCRS Plan, Annex A – Congregate	COV State Managed Pet Shelter Plan	VDH Emergency Response Plan, Annex H, Mass Care Plan	VSP Site Security & Traffic Management Plan
		Addendum			
Christopher Newport University	CNU	A1			✓
George Mason University	GMU	A2			✓
James Madison University	JMU	A3			✓
Longwood University	LU	A4			✓
Patrick Henry Community College	PHCC	A5			✓
Paul D. Camp Community College	PDCCC	A6			✓
Richard Bland College	RBC	A7			✓
University of Virginia	UVA	A8			✓
Virginia Commonwealth University	VCU	A8			✓
Virginia Military Institute	VMI	A10			✓
Virginia State University	VSU	A11			✓

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Virginia Tech	VT	A12			✓
William & Mary, College of	CWM	A13			✓

Appendix 1

Shelter Position Descriptions

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Position	Responsible Agency	Position Description
Shelter Manager	VDSS	Ultimately responsible for set-up, management, operation, and break-down of the shelter. Responsible for providing supervision and operational support for shelter operations. Supervises work team and service providers. Ensures the needs of shelter occupants are met. Assumes accountability for assigned workers within the shelter. Directs resource, service, and commodity requests to the ECT as needed.
Manager's Assistant (Liaison/Scribe)	VDSS	Gathers, documents, and maintains a record of all activity that occurs in the shelter including, but limited to, maintaining staffing and phone rosters, timesheets, daily shelter schedules, and key actions/activities. Maintains accountability of on-site staffing and reports any absences or changes to the Shelter Manager and ECT. Maintains the shelter management daily schedule/battle rhythm and ensures appropriate participants are involved in scheduled activities. Submits reports and participates on scheduled conference calls with or representing the Shelter Manager as required and scheduled by the ECT.
Access and Functional Needs Coordinator	VDEM	
Shift Supervisor	VDSS	Responsible for ensuring proper staffing levels and workloads are in place to meet the non-medical human care services provided in the shelter. Problem solves and reports issues and/or concerns within the non-medical human care services areas to the Shelter Manager to resolve. Discusses with the shelter manager any staffing adjustments needed within the non-medical human care services area including the addition or release of staff.

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<p>Registration Team Leader</p>	<p>VDSS</p>	<p>Responsible for providing supervision of, administration of, and operational support for shelter registration operations. Ensures that all persons (including residents, staff, volunteers, and visitors) go through the registration process and are appropriately badged for easy identification within the shelter. Ensures that all staff and volunteers check-in and out each shift. Ensures that entry points and reception areas are adequately and appropriately staffed to meet resident needs and are adequately and appropriately supplied with equipment, supplies and refreshments. Coordinates delivery of immediate needs for residents, especially those to aid in registration such as interpretation and/or language services. Develops a rotation and break schedule for Registrars (registration/greeting/break).</p>
<p>Registrar</p>	<p>VDSS</p>	<p>Receives, greets, and registers all shelter residents, staff, volunteers and visitors. Ensures all individuals in the shelter are aware of the shelter rules and guidelines. Checks shelter staff and volunteers in and out daily. Discharge all shelter residents, staff, volunteers, and visitors when they transition out of the shelter. Determines immediate needs of shelter residents (interpretation, access, functional and/or medical) and requests solutions through the Registration Team Leader. Refers individuals requiring further medical assessment to the medical screener.</p>
<p>Unaccompanied Minors Coordinator</p>	<p>VDSS</p>	<p>A registrar with CPS background, may be temporarily reassigned on-site, as an Unaccompanied Minors Coordinator (UMC). As the UMC, he/she manages the on-site presence of unaccompanied minors following established VDSS Family Services policies and procedures and in coordination with other appropriate state and local partners.</p>
<p>Distribution Coordinator</p>	<p>VDSS</p>	<p>Coordinates distribution of food and supplies to shelter residents, staff, volunteers and visitors to properly account for consumable resources distributed during the sheltering event.</p>

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Dormitory Team Leader	VDSS	Supervises shelter staff in the dormitory/living areas of the shelter. Coordinates delivery of supplies and services to meet resident needs. Oversees setup of the dormitory area. Develops assignment mechanism for cots/space within the dormitory areas and maintains a list of cot assignments by resident. Develops staff break rotation to ensure full-time monitoring of dormitory areas to maintain a safe and quiet environment for residents to sleep and rest. Communicates and directs timely implementation of emergency procedures consistent with the safety and security plans for the facility.
Dormitory Coordinator	VDSS	Assists with the set-up of the dormitory/living areas of the shelter. Works with shelter residents to meet accommodation needs, including health, hygiene, comfort, disability, and access and functional needs, through the Dormitory Team Leader. Monitors the dormitory area to maintain a safe and quiet environment for residents to sleep and rest; ensures shelter rules and guidelines are followed. Assists residents by answering questions, providing directions and information, and helping with personal needs.
Residents' Services Team Leader	VDSS	Supervises shelter staff providing activities and transition services coordination. Ensures staff is coordinating between one another to eliminate conflicts and encourage self-reliance and transition from the shelter. Assesses shelter morale and assists staff in solutioning activities and programs to eliminate stress, boredom and unwanted behavior. Communicates unmet needs preventing transition from the shelter to the Shelter Manager. In coordination with the Shelter Transition Coordinator, determine the need for a full Shelter Transition Team and recommend its activation to the Shelter Manager.
Residents' Activities Coordinator	VDSS	Coordinates with the Site and local entities/groups to provide recreational activities to support morale, eliminate stress and boredom, and defuse unwanted behavior. Plan, schedule, advertise and execute each activity.

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<p>Children's Services Coordinator</p>	<p>VDSS</p>	<p>Provide access to supplies and activities for children in the shelter. In coordinate with the Residents' Activities Coordinator, plan, schedule, advertise and execute child-friendly and family activities. Determine additional needs of the child population (including child care and/or education); notify the Residents' Services Supervisor of those needs that cannot be met with current resources.</p>
<p>Shelter Transition Coordinator</p>	<p>VDSS</p>	<p>Provide initial casework for each family group to assist in transition from the shelter. Determine disaster-caused unmet needs and provide informational resources that may assist in meeting those needs. Assist shelter residents in applying for available assistance programs (both disaster and day-to-day). Provide data to the Residents' Services Supervisor delineating those obstacles that are preventing residents from transitioning from the shelter. When resident needs for transition are complex and need extensive casework, recommend to the Residents' Services Supervisor the activation of a Shelter Transition Team. Lead a Shelter Transition Team, if activated.</p>
<p>Logistics and Supply Supervisor</p>	<p>VDSS</p>	<p>Oversees non-human resource management. Supports the shelter with supplies, resource ordering, and inventory tracking. Manages shelter resource requirements including supplies, parking and transportation. Forecasts ground support needs and ensures ground support is available for use by the shelter. Directs the allocation and use of space and onsite resources. Directs the logistics contract staff and services. Coordinates with the ECT to ensure adequate and appropriate paperwork is maintained and submitted for state and federal reimbursement.</p>
<p>IT and Communications Leader (COM-L)</p>	<p>VITA</p>	<p>The COM-L is responsible on site to ensure all communications needs are met. They also provides training to shelter personnel on the use of communications equipment including the assignment of equipment and radio channel usage.</p>

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<p>On Site IT Support - Local</p>	<p>Host Facility</p>	<p>This onsite IT support is provided by the host facility to assist shelter staff with getting on the local area network and any other system associated with the facility. They are not responsible for the IT equipment itself (unless it is provided by the facility), but rather to ensure that users can get on the network and access the Internet.</p>
<p>IT Support – VITA</p>	<p>VITA</p>	<p>VITA must also provide onsite IT support for the Commonwealth owned devices and any other IT equipment delivered to the shelter. This person must have administrator privileges so that software can be loaded on devices and trouble shot, as required.</p>
<p>Health Services Unit Leader</p>	<p>VDH</p>	<p>There shall be a licensed MD, DO or Nurse Practitioner available to direct medical/health personnel and services at the mass care facility, either in-person or virtually.</p> <p>Nurse practitioner practice shall be based on specialty education preparation as an advanced practice registered nurse in accordance with standards of the applicable certifying organization, as identified in 18VAC90-30-90. Nurse Practitioner practice is restricted to practicing within the scope of training recognized by the certifying boards. Therefore, some nurse practitioners may not be able to treat shelter residents of every age and gender and may need to seek additional assistance.</p> <p>MD, DO, and Nurse Practitioners may assist staff in coordinating care, identifying those that require a higher level of care than currently available at the shelter, assisting with medication or durable medical equipment orders, and, when needed, facilitating and/or writing orders for care that exceeds the scope of independent nursing practice when necessary and when qualified nurses are available to perform the care.</p> <p>The MD, DO or Nurse Practitioner may provide on or off-site consultation. If medications or treatments are ordered, the clinician must establish a provider-patient relationship either via</p>

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		<p>telemedicine by following the VDH policy or in person.</p>
<p>Environmental Health Specialist</p>	<p>VDH</p>	<p>VDH Environmental Health personnel may be required to access shelter facilities prior to activation to ensure regulations are met. Duties also include monitoring food and water safety and sanitation and participating in outbreak investigations, as needed. In addition, staff are able to provide guidance and/or services relating to rabies investigations in pet shelters associated with the mass care facility.</p>
<p>Nurses (Screening, Dormitory, Communicable Disease)</p>	<p>VDH</p>	<p><i>Staffing for shelters shall include registered nurses (RNs) and licensed practical nurses (LPNs) who will work within the scope of their licenses. It should be noted that LPNs practice under the direct supervision of a Registered Nurse and should not staff a shelter as the nursing lead. In addition, Registered Nurses may not, by regulation, delegate emergent and non-emergent triage. Therefore, although LPNs may assist in shelter intake and assessment, they may not triage and determine the appropriate placement of shelterees. Public health nursing services typically include health assessments, first aid, triage, limited medication administration assistance, and case management. Nurses assigned to work in shelters must be currently certified in Adult and Pediatric CPR/AED (BLS).</i></p> <p>Screening Nurse In order to prevent the spread of contagious conditions, each individual who appears</p>

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	<p>symptomatic shall be triaged by a Screening Nurse at the time they enter the mass care facility to detect any possible conditions necessitating isolation or immediate treatment at an acute care facility. The VDH Health/Medical Intake Form is a mechanism for evaluating the health status of a person that includes taking a health history and asking questions regarding their behavioral and physical health needs/practices. The first section of the Health/Medical Intake Form includes the Verbal Triage Questionnaire. These questions will be asked by the Screening Nurse in order to quickly evaluate a person’s condition in determining admission to a mass care facility or referral to a healthcare facility.</p> <p>Dormitory Nurse Nurses assigned to the dormitory area are responsible for providing limited medical care to individuals with medical needs. These services include basic first aid, health assessment and screening, limited medication administration assistance, and case management. This may involve the coordination and support of outside medical and pharmaceutical services.</p> <p>Surveillance Officer The Surveillance Officer is either a district epidemiologist or communicable disease nurse and provides communicable disease surveillance within a shelter, identifies conditions or practices that promote the spread of disease within the shelter, and advises shelter staff and shelterees on infection control measures to mitigate the spread of disease. The Surveillance Officer will monitor conditions and practices within the shelter for issues that may promote the spread of disease and will provide guidance and education to shelter staff and shelterees on ways to prevent or mitigate the spread of communicable disease.</p>
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<p>Health Services Assistant</p>	<p>VDH</p>	<p>Health Services Assistants perform administrative duties and general support services for medical and public health personnel in the mass care facility setting. Duties include initiating and maintaining a log of events and key actions, managing check-in and distributing job action sheets, and providing a safe, secure location to maintain all health and medical documentation.</p>
<p>Mental and Behavioral Health Services</p>	<p>VDBHDS</p>	<p>Personnel must be vetted and come through the Virginia Department of Behavioral Health and Developmental Services or the Local Community Services Board. Personnel should provide crisis, bereavement and traumatic grief counseling services, make rounds watching for signs of agitation, depression or confusion and resolve potential problems, and assist in promoting diversions and activities, conversation, and how to be most therapeutic for the situation.</p>

Appendix 2

Shelter Management Communication Schedule (example)

Annex A – Congregate Shelters

Day Shift			
Time	Event	Participants	Brief Description
0630	Site Shelter Manager Shift Change Briefing	Out-going and In-Coming Site Shelter Manager and Co-Manager	Exit briefing between shift shelter managers to discuss shift activities, ongoing activities, unmet needs that need to be addressed in the next shift, and other pertinent information to aid the incoming shift with shelter operation.
0700	Shelter Management Shift Change Briefing	In-Coming Shelter Management Team	In-briefing by the Shelter Manager to the management team of out-going shift activities, activities for the coming shift, to assign resolution of unmet needs of the previous shift, and discuss/address other pertinent information to aid in the operation of the shelter.
0800	Shelter Managers Conference Call	ESF 6, ECT Liaison Group Leader, Site Shelter Manager(s) and Co-Manager(s)	Coordination and situational awareness call between all Shelter Managers, the ECT and EST 6.
0830	Staff and Volunteer Check-In Report	Assistant to the Shelter Manager and Registration Team Leader	Report listing all staff/volunteer members that have checked-in for the day shift that day including identification of any of those scheduled that did not report.
0830	Communications List	Assistant to the Shelter Manager and Registration Team Leader	The communications list for the day will contain relevant contact information for each individual by name and position within the shelter.
0900	Residents' Briefing	Shelter PIO and others as needed and requested	Early day situational and operational briefing for shelter residents.
1200	Shelter Resident Count Reconciliation	Dormitory Team Leader and Registration Team Leader	Mid-day head count of individuals within the based on people in dorm and/or personal belongings in dorm. This list (by cot number) will be reconciled with the registration system residents still listed as in the shelter to determine any

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			differences. No individual status will change within the registration system until confirmation is made. Both numbers will be provided to the Shift Supervisor and Shelter Manager for planning purposes. The Shelter Manager will then provide the data to the ECT and ESF 6.
1300	Shelter Management Mid-Shift Briefing	Shelter Management Team	Mid-shift situation, operation, and coordination briefing.
1400	Shelter Managers Conference Call	ESF 6, ECT Liaison Group Leader, Site Shelter Manager(s) and Co-Manager(s)	Coordination and situational awareness call between all Shelter Managers, the ECT and EST 6.
1600	Next Day's Resident's Schedule Completed and Prepared to Post	Residents' Services Team Leader	A completed residents' schedule of activities for the following day to be posted overnight.
1830	Site Shelter Manager Shift Change Briefing	Out-going and In-Coming Site Shelter Manager and Co-Manager	Exit briefing between shift shelter managers to discuss shift activities, ongoing activities, unmet needs that need to be addressed in the next shift, and other pertinent information to aid the incoming shift with shelter operation.

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Night Shift			
Time	Event	Participants	Description
1830	Site Shelter Manager Shift Change Briefing	Out-going and In-Coming Site Shelter Manager and Co-Manager	Exit briefing between shift shelter managers to discuss shift activities, ongoing activities, unmet needs that need to be addressed in the next shift, and other pertinent information to aid the incoming shift with shelter operation.
1900	Shelter Management Shift Change Briefing	In-Coming Shelter Management Team	In-briefing by the Shelter Manager to the management team of out-going shift activities, activities for the coming shift, to assign resolution of unmet needs of the previous shift, and discuss/address other pertinent information to aid in the operation of the shelter.
1930	Residents' Briefing	Shelter PIO and others as needed and requested	Evening situational and operational briefing for shelter residents.
2000	Shelter Managers Conference Call	ESF 6, ECT Liaison Group Leader, Site Shelter Manager(s) and Co-Manager(s)	Coordination and situational awareness call between all Shelter Managers, the ECT and EST 6.
2030	Staff and Volunteer Check-In Report	Assistant to the Shelter Manager and Registration Team Leader	Report listing all staff/volunteer members that have checked-in for the day shift that day including identification of any of those scheduled that did not report.
2030	Communications List	Assistant to the Shelter Manager and Registration Team Leader	The communications list for the day will contain relevant contact information for each individual by name and position within the shelter.
0000	Shelter Resident Count Reconciliation	Dormitory Team Leader and Registration Team Leader	Mid-day head count of individuals within the based on people in dorm and/or personal belongings in dorm. This list (by cot number) will be reconciled with the registration system residents still listed as in the shelter to determine any

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			differences. No individual status will change within the registration system until confirmation is made. Both numbers will be provided to the Shift Supervisor and Shelter Manager for planning purposes. The Shelter Manager will then provide the data to the ECT and ESF 6.
0000	Residents' Activities Schedule Posted	Shift Supervisor	Post the Residents' Activities Schedule for the coming day as created by the Residents' Services Team during the previous day shift.
0100	Daily Meal Requirement Determination	Registration Team Leader, Logistics and Supply Coordinator, and Food Services Manager	A determination of the number of meal needed on estimated resident, staff, and volunteer population within the shelter for the coming day to include the number of any special dietary considerations and/or meals that must be provided.
0100	Shelter Management Mid-Shift Briefing	Shelter Management Team	Mid-shift situation, operation, and coordination briefing.
0200	Shelter Managers Conference Call	ESF 6, ECT Liaison Group Leader, Site Shelter Manager(s) and Co-Manager(s)	Coordination and situational awareness call between all Shelter Managers, the ECT and EST 6.
0630	Site Shelter Manager Shift Change Briefing	Out-going and In-Coming Site Shelter Manager and Co-Manager	Exit briefing between shift shelter managers to discuss shift activities, ongoing activities, unmet needs that need to be addressed in the next shift, and other pertinent information to aid the incoming shift with shelter operation.

Appendix 3
Site Walkthrough Form



COMMONWEALTH OF VIRGINIA STATE COORDINATED REGIONAL SHELTER

Purpose and Scope: The purpose of the State Coordinated Regional Shelter Building Assessment is to record pre-existing facility conditions prior to use of the site for support of or use as a State Coordinated Regional Shelter. Each building to be used in support of the State Coordinated Regional Shelter on the site will be reviewed by a team consisting of at a minimum a representative of the site and a representative of the Virginia Department of Social Services (either the Assistant Shelter Manager for Logistics or the Shelter Manager).

BUILDING ASSESSMENT

SECTION A

Building Name: Click here to enter text.	Date: Click here to enter a date.	
Address: Click here to enter text.		
Click here to enter text.		
City: Click here to enter text.	State: Virginia	Zip Code: Click here to enter text.

SECTION B

Assessment performed by:

NAME	TITLE	AGENCY
Click here to enter text.	Click here to enter text.	Click here to enter text.
Click here to enter text.	Click here to enter text.	Click here to enter text.
Click here to enter text.	Click here to enter text.	Click here to enter text.
Click here to enter text.	Click here to enter text.	Click here to enter text.
Click here to enter text.	Click here to enter text.	Click here to enter text.
Click here to enter text.	Click here to enter text.	Click here to enter text.

SECTION C

Additional System Inspections:

Fire Alarm	Sprinkler	HVAC	Plumbing	Other
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments (other): Click here to enter text.				

SECTION D

Acknowledgement statement: [Click here to enter text.](#)

PRINTED NAME or SIGNATURE*	Check	TITLE	AGENCY	Date
Click here to enter text.	<input type="checkbox"/>	Click here to enter text.	Click here to enter text.	Click here to enter a date.
Click here to enter text.	<input type="checkbox"/>	Click here to enter text.	Click here to enter text.	Click here to enter a date.
Click here to enter text.	<input type="checkbox"/>	Click here to enter text.	Click here to enter text.	Click here to enter a date.
Click here to enter text.	<input type="checkbox"/>	Click here to enter text.	Click here to enter text.	Click here to enter a date.

SECTION E

Additional property assessment reports:

Property Assessment Attachment(s)	<input type="checkbox"/>	Number of sheets: Click here to enter text.
--	--------------------------	--

PROPERTY ASSESSMENT ATTACHMENT

Room #: Click here to enter text.	Date: Click here to enter a date.
--	--

Room type (designed usage): Click here to enter text.	
Video taken:	<input type="checkbox"/> Pictures of Damage: <input type="checkbox"/>

FOCUSED ASSESSMENT	CONDITION				
	Good	Fair	Poor	Missing	N/A
Walls	<input type="checkbox"/>				
Ceiling	<input type="checkbox"/>				
Floor	<input type="checkbox"/>				
Windows	<input type="checkbox"/>				
Doors	<input type="checkbox"/>				
Furniture	<input type="checkbox"/>				
Blinds	<input type="checkbox"/>				
Lights	<input type="checkbox"/>				
Outlets	<input type="checkbox"/>				
Equipment	<input type="checkbox"/>				

Assessment - Comments / Notes: Click here to enter text.

Appendix 4

Fire Watch Requirements and Log

*Virginia Department of Fire Programs
State Fire Marshal's Office*

FIRE WATCH

When a fire watch is required by the Virginia Statewide Fire Prevention Code (SFPC) and/or the fire code official in an existing structure(s) or portions thereof, or for a fire alarm or sprinkler system that is out of service, or other fire hazard situation, it shall be in accordance with the following.

DEFINITIONS

Fire Watch (SFPC Section 202). A temporary measure intended to ensure continuous and systematic surveillance of a building or portion thereof by one or more qualified individuals for the purposes of identifying and controlling fire hazards, detecting early signs of unwanted fire, raising an alarm of fire and notifying the fire department.

Fire Watch (NFPA). The assignment of a person or persons to an area for the express purpose of notifying the fire department and/or building occupants of an emergency, preventing a fire from occurring, extinguishing small fires, or protecting the public from fire or life safety dangers.

IMPLEMENTATION

1. Preplanned or emergency impairment of fire alarm or sprinkler systems.
2. During hot work. Operations including cutting, welding, Thermit welding, brazing, soldering, grinding, thermal spraying, thawing pipe, installation of torch-applied roof systems, producing sparks or any other similar activity. *NOTE – Applicable “requirements” are a Hot Work Program, including fire watch, as described in Chapter 26 of the SFPC.
3. During demolition, renovation, or construction operations that involve open-flame or heat producing devices.

NOTIFICATION

Where a required fire protection system is out of service, the fire department and the fire code official shall be notified immediately.

REQUIREMENTS

A fire watch shall have all of the elements listed in this section.

1. Dedicated person(s). At least one dedicated person is required to conduct patrols. Persons assigned to fire watch shall not have any other responsibilities but to perform the fire watch. Additional personnel shall be added as necessary to meet the interval requirements. All personnel shall meet the following criteria and be:
 - a. At least 18 years of age.
 - b. Competent to identify fire hazards.
 - c. Knowledgeable of the property's address and be capable of effectively communicating the need for a fire department response.
 - d. Physically capable to perform patrols and self-preservation.
 - e. Familiar with the structure and the emergency plan for the structure.
2. Patrol intervals. The structure or portions thereof shall be checked for fire hazards every 30 minutes or as required by the fire code official.

3. Communication device(s). Fire watch personnel shall have a cellular phone or other means of communication acceptable to the fire code official immediately available to initiate a fire department response. In the event of a fire, fire watch personnel shall alert occupants and take appropriate action.
4. Fire watch log sheet is required to document the activities of the fire watch. The log shall list the following:
 - a. Building name.
 - b. Building address.
 - c. Name(s) of personnel conducting the fire watch.
 - d. Date.
 - e. Patrol start and end time.
 - f. Any circumstances prompting Fire Department notification.
5. Termination. A fire watch shall continue until all of the following are met.
 - a. The initiating circumstances have been addressed or abated.
 - b. The fire code official has been notified.
 - c. The fire code official has approved the fire watch to be discontinued.
 - d. The fire department has been notified.

PROHIBITED OPERATIONS

1. The use of open flames such as from candles, lanterns, heaters, portable open-flame devices, or other open-flame decorative devices is prohibited in areas where a sprinkler or fire alarm system is impaired.
2. Smoking or carrying of a lighted pipe, cigar, cigarette or any other type of smoking paraphernalia or material is prohibited in areas where a sprinkler or fire alarm system is impaired.

Appendix 5

Staff/Volunteer Paper Check-In/Out Form

Appendix 6

Disclosure Statement and Shelter Rules

STATE COORDINATED REGIONAL SHELTER

CAUTIONS AND RISKS

The Virginia Department of Social Services does not assume liability for the safety of you, your children, or your property. When you enter this shelter, you assume liability for you, your children, and your property. Please exercise caution at all times. This shelter is under the law enforcement jurisdiction of the State Police, however, there may not be a State Police Officer on the premises at all times.

Please be aware that the Virginia Department of Social Services admits all persons who follow shelter protocols to be housed in its shelters. This means that there may be individuals who have been convicted of other violent crimes, sex offenses, or other felonies admitted to this shelter along with you. Be aware of your surroundings and supervise your children and your belongings at all times. **DO NOT LEAVE CHILDREN OF ANY AGE UNATTENDED OR WITH PERSONS WHOM YOU DO NOT KNOW.** The Department suggests that adults who enter the shelter together develop a system to maintain contact with one another and be aware of each other's location within the shelter as much as possible. Report any suspicious activity to any staff member at the shelter or call the State Police.

Any individual, child or adult, who violates shelter protocols **may** be asked to leave the shelter. If the individual refuses to leave, the State Police will be called to escort the individual off the shelter property. That individual will not be readmitted to the shelter.

According to Section 44-146.15(3) of the Code of Virginia, no weapons of any kind are permitted in the possession of any individual other than law enforcement officers while in the shelter.

STATE COORDINATED REGIONAL SHELTER

RULES



NO SMOKING

Smoking is permitted in designated areas outside of the shelter only.



NO WEAPONS

The possession of any type of weapon within the shelter is prohibited. This includes, but is not limited to, guns, knives, and any other item deemed a weapon by shelter security. Failure to comply with this rule may result in immediate eviction.



NO ALCOHOL OR DRUGS

The use of alcohol or any illegal drug while residing within the shelter may result in immediate eviction.



USE OF ELECTRONICS

Set all electronics to vibrate or silent mode.
Take calls outside of the dormitory areas.
Keep volumes low or use headphones.
Be mindful of the content on your device.
Do not take pictures of people without their permission.
Use wi-fi at your own risk.



REGISTERED SEX OFFENDERS

Any individual listed in the Virginia Sex Offender and Crimes Against Minors Registry, as defined by the Virginia Code, Chapter 9, who enters the shelter is required to notify the shelter management of his/her registry status

Appendix 7

Needs Assessment Tool for Registration

Needs Assessment Tool for Registration

<i>Answer all of the following for ANYONE in your family or group....</i>	If Yes, then. . .
Need accommodations for effective communication?	Using the language boards, allow the individual to point to their needed form of communication and request the appropriate tool (ex: spoken or visual language interpretation) through the <u>Registration Team Leader</u> before continuing the registration process.
Currently ill or experiencing any symptoms of illness?	Send ill person (with parent if child) to <u>medical assessment</u> for further assistance.
Have any needs regarding your medications?	Send person needing assistance (with parent if child) to <u>medical assessment</u> for further assistance.
Have any medications that need to be refrigerated?	Send person needing assistance (with parent if child) to the <u>first aid station</u> for further assistance.
Need any medical supplies or require assistance with medical equipment?	Send person needing assistance (with parent if child) to <u>medical assessment</u> for further assistance.
Need any routine or regular medical treatments?	Send person needing assistance (with parent if child) to <u>medical assessment</u> for further assistance.
Need assistance with toileting, mobility or feeding? Do you have a caregiver to help you with these activities?	If yes and does not have a caregiver , send the person who needs assistance (with parent if child) to the <u>Access and Functional Needs Coordinator</u> for further assistance.
Have any problems traveling independently within the shelter? Do you have the mobility assistance tools needed to assist your travel?	If yes and does not have mobility assistance tool(s) , send the person who needs assistance (with parent if child) to the <u>Access and Functional Needs Coordinator</u> for further assistance.
Have any severe or life threatening allergies?	In EWA Phoenix on the appropriate individual's screen, input, on the Functional Needs Tab, the allergy type (food or otherwise) and list what the allergy is to. Send person/family to the general population dormitory unless there are other issues that need to be addressed.
Have any special dietary needs or food restrictions?	In EWA Phoenix on the appropriate individual's screen, input, on the Functional Needs Tab, the dietary needs type (medical or otherwise) and any special considerations in the notes. Send person/family to the general population dormitory.
Other needs/concerns?	Make best determination of your own of how to address the issue/concern and if they should be sent to the medical needs registration, first aid station and/or general population dormitory.

Appendix 8

Visitor Processing Procedure

STATE COORDINATED REGIONAL SHELTER VISITOR PROCESSING PROCEDURE

The State Coordinated Regional Shelters must ensure a safe and secure environment for shelter residents, staff, volunteers and authorized guests. Elected officials, media, and unrequested volunteers are likely to visit to the shelter; although less likely, shelter residents may also have visitors (family, friends, insurance agents/adjustors, etc.). Unauthorized persons may pose physical or security risks, therefore it is critical that strict access is imposed and maintained.

Unauthorized Presence

During the initial registration influx of people, it will be challenging to differentiate between staff, evacuees and visitors; however, it is incumbent upon the registration staff to ascertain the reason for each person's presence, e.g, scheduled staff (confirm with staffing roster), incoming evacuee, or visitor.

The following steps will be taken in regard to all visitors.

1. All visitors will remain outside the shelter entrance or in an identified, secure shelter space until approved for admission into the shelter.
2. When identified as a visitor at registration and intake, the registration staff escort the visitor(s) outside of the shelter entrance or in an identified, secure shelter space until approved or denied admission.
3. Any SCR shelter staff member who notices a person without an ID band or visitor's badge should approach the individual(s) and bring him/her/them to registration for formal visitor processing. SCR shelter staff members have first line responsibility for enforcing the visitor management protocol.
4. All requests for visits by media, government officials, etc. will be referred immediately to the shelter Public Information Officer.

A Shelter Manager may adjust these steps to fit the needs of a SCR shelter as long as the intent of the process remains intact.

Visitor Authorization

The approval process requires:

1. Registration staff notify the Registration Team Leader of the presence of the visitor(s);
2. Registration Team Leader speaks with the visitor(s) to determine reason for visit, completes a Visitor Authorization Request Form, and forwards Form to the Shelter Manager for approval.
3. The Shelter Manager will either approve or deny the request and
 - a. forward a copy of the Form to the Registration Team Leader and
 - b. give the original to the Assistant to the Shelter Manager to archive.

4. If approved, the Registration Team Leader will notify the registration staff to register the visitor in accordance with registration procedures.
5. If denied, the Registration Team Leader will
 - a. advise the requesting visitor of decision and options, if any, either
 - i. update the request for reconsideration and restart the request process or
 - ii. close the request if no further action is needed and ensure the requestor is escorted outside of the shelter building.
 - b. notify security staff if the requestor becomes unruly or disruptive.

Registration and Check out

Each visitor must be registered into EWA Phoenix (or shelter paper registration if EWA Phoenix is unavailable) as a “Visitor” to distinguish status from shelter residents and staff. Visitors will not receive ID bands, therefore when inputting an ID number (which typically comes from the band), use the following code:

[SCRSIdentifier]VIS[GuestFirstNameInitial][GuestLastNameInitial]MMDDYY

(example: [Paul D. Camp]VIS[Mary][Beane]09/12/2016 displays as PDCVISMB091216)

SCRS Site Identifier	
UVA	University of Virginia
GMU	George Mason University
CNU	Christopher Newport University
WM	William & Mary
VSU	Virginia State University
VCU	Virginia Commonwealth University
RBC	Richard Bland College
JMU	James Madison University
VMI	Virginia Military Institute
VT	Virginia Tech
PDC	Paul D Camp Community College – Franklin Campus
NV	Northern Virginia Community College – Annandale
LU	Longwood University
PH	Patrick Henry Community College

Visitor Identification

Upon registration, the visitor will receive a handwritten guest badge (included in the shelter supplies) that displays the visitor’s name, visit date, and responsible SCRS staff member. A visitor’s badge is good for ONE day only. Badges may only be distributed for the date/time approved on the SCRS Shelter Visitor Access Request Form signed by the Shelter Manager. A new badge must be issued daily if a visitor is approved for more than one day.

Example:

VISITOR

Name: Michael Bennett

Visiting: Joe Kyle, Behavioral Health TL

Date: September 12, 2016

Visitor Conduct

While on site, all visitors including media and government officials:

1. must wear badges at all times and MUST return badges to registration prior to departing.
2. must be accompanied by the SCR shelter staff member being visited. Example: A media team must be accompanied throughout the visit by the Public Information Officer.
3. may not photograph, video, or record any activity or conversations without prior approval from the Shelter Manager in coordination with the Public Information Officer.

State Coordinated Regional Shelter Visitor Access Request Form

(form must be completed for each person requesting access)

<i>Completed By SCR Shelter Staff Member Receiving Request</i>	
Name	
Affiliation	
Contact Information	Phone Number: E-mail: Street Address:
Reason for Visit	
Visit Date/Time Requested	
Request Submitted By	Date/Time:
<i>Completed By Shelter Manager or Designee</i>	
Status <i>(circle one)</i>	Approved* Denied**
Reason (if denied)	
SCR Shelter Staff Visiting/Assigned	
Signature/Date	Date/Time:

**If approved, forward copy of form to the Registration and Intake Group Supervisor and the Assigned SCRS Staff Member.*

***If denied, forward copy of form to submitting staff member such that contact can be made to requesting visitor.*

Appendix 9
Shelter Schedule Template

Shelter Schedule

DATE

	Lights On	6:00 a.m.
	Breakfast	7-8:30 a.m.
	Resident Briefing	9 a.m.
	Children's Activities Opens	9:30 a.m.
	Shower (Group 1)	9:30 a.m. – 12 p.m.
	Lunch	12 – 1 p.m.
	Shower (Group 2)	2 – 4:30 p.m.
	Children's Activities Closes	6 p.m.
	Dinner	6 – 7:30 p.m.
	Resident Briefing	7:30 p.m.
	Movie Night	8:30 p.m.
	Lights Off	11 p.m.

Appendix 10
Meals and Breaks Guidance

STATE COORDINATED REGIONAL SHELTER MEALS AND BREAKS GUIDANCE

Policy Overview

The Virginia Department of Human Resource Management (DHRM) has provided guidance to all Commonwealth staff in regards to lunch period and break. This guidance lies within the *DHRM Policy and Procedures Manual* – Policy 1.25.

Due to the extenuating circumstances of the emergency event and the workload of maintaining a State Coordinated Regional Shelter, being able to allow actual lunch breaks will be difficult especially during the initial onset of the event. Policy 1.25 states:

- *Employees who work at least six consecutive hours shall be afforded a lunch period (meal break) of at least 30 minutes except in situations where shift coverage precludes such lunch breaks.*
- *Employees who work a second consecutive shift shall be afforded a meal break after working four hours during the second shift.*
- *The lunch period shall not be included in the count of hours worked per day, except when the agency head or designee has designated the lunch break as part of the work schedule. When employees are required to work during their lunch, that period shall be counted as time worked.*

Example: When necessary to provide staffing for client (patient or inmate) services and care, the lunch period shall be considered time worked.

Meals (breakfast, lunch, dinner, and a midnight meal) will be provided on-site to all staff while working at the SCR Shelter. Because staff will not be leaving the SCR Shelter site and will not be guaranteed complete removal of all work duties, SCR Shelter staff lunches, whether eaten at duty-site or eaten on-site away from their duty-site) will be considered time worked. If a staff member is allowed to go off-site for a meal or meals, this time should be recorded on their time sheet as a lunch period and should not exceed 30 minutes. Any person who leaves the shelter site should also be certain to check-out accordingly within EWA Phoenix and check-in upon return.

Due to the stressful nature of the SCR Shelter, supervisors should also do their best to assure short breaks for their staff between meals. Policy 1.25 states:

- *Agency managers may grant employees who work an eight-hour day or longer a maximum of one 15-minute rest break before and one 15-minute rest break after the required lunch period.*
- *Rest breaks are included in the required hours of work per day.*

Meal and Break Scheduling

To ensure adequate coverage for essential shelter tasks, supervisors will need to be diligent in scheduling breaks. Supervisors will also need to be aware of the rest and personal needs of each of their staff members. This will be a delicate balance and making your staff aware of their break schedules will eliminate many concerns and disputes. A simple suggestion would be to address the break schedule and how you, as the supervisor, will implement it during your shift change briefing daily.

The SCR Shelter plan indicates the following meal schedule:

0700-0830 *Breakfast*
1200-1300 *Lunch*
1800-1930 *Dinner*
0000 *Midnight Meal (Staff Only)*

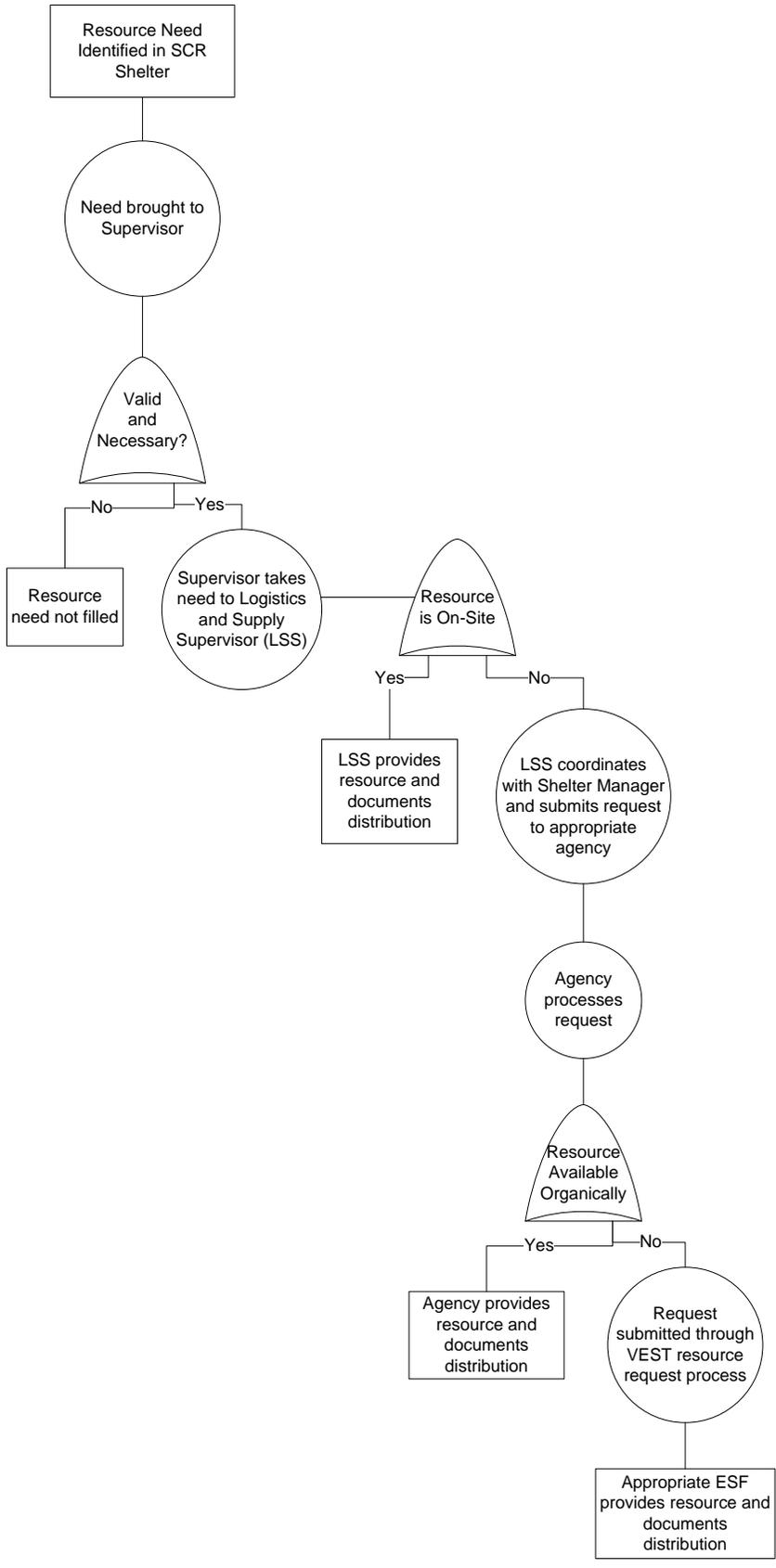
An example break schedule for a team could be:

Shift change briefing at 0700. Staff will be requested to assure meal times are kept at NO more than 30 minutes and break times kept to NO more than 15 minutes.

	Supervisor	Staff 1	Staff 2	Staff 3	Staff 4	Staff 5	Staff 6	Staff 7	Staff 8
Breakfast	<i>Flexible</i>	0715	0730	0745	0715	0730	0745	0715	0730
Break	<i>Flexible</i>	0930	0945	1000	1015	0930	0945	1000	1015
Lunch	<i>Flexible</i>	1200	1215	1230	1245	1200	1215	1230	1245
Break	<i>Flexible</i>	1530	1545	1600	1615	1530	1545	1600	1615

Appendix 11

Shelter Resource Request Process



Appendix 12

Shelter Resident Transition

Section Currently Under Development

Appendix 13

Example After Action Form

1. Which shelter did you support?
2. What position did you fill?
3. Did you receive your initial SWAN notification on anything other than work e-mail?
 - a. Yes
 - b. No
 - i. Prior to this activation, were you aware that you could provide non-work contacts (such as your personal cell and e-mail) for SWAN notification?
 1. Yes
 2. No
4. What additional information would have been helpful in your notification of activation?
5. Were you provided with agency transportation?
 - a. Yes
 - i. Where you delayed in reporting at the identified time to your shelter site due to lack of transportation?
 1. Yes
 - a. Please explain.
 2. No
 - b. No
6. Were you provided with agency lodging?
 - a. Yes
 - i. Was room available for you as you checked in?
 1. Yes
 2. No
 - a. Please explain.
 - b. No
7. What documentation or tools that was not provided, would have been helpful during your deployment?
8. What additional training would have made you more comfortable in fulfilling your emergency role?
 - a. What topics?
 - b. How often do you think these trainings should be provided?
 - c. Other suggestions?
9. Did you receive adequate information and updates about the ongoing situation from:
 - a. Shelter Management
 - i. Yes
 - ii. No
 1. Please explain – What was missing?
 - b. Headquarters
 - i. Yes
 - ii. No
 1. Please explain – What was missing?

10. How could you have been supported better by:
 - a. Shelter Management
 - b. Headquarters
11. What was the biggest success you saw or experienced during the event?
12. What was the most important area where improvement is needed?
13. What else should the agency consider as we evaluate and improve current plans and procedures for state sheltering?

Appendix 14

Epidemic/Pandemic Considerations for Congregate Shelters

